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COUNTY BOROUGH OF BRIGHTON.



Annual Report
OF THE
MEDICAL OFFICER OF HEALTH
AND
SCHOOL MEDICAL OFFICER
FOR THE YEAR 1937.

DUNCAN FORBES, M.D., B.Sc., D.P.H.

BRIGHTON:
Pell (Brighton) Ltd., 105 Church Street, Brighton, 1.

1938

COUNTY
BOROUGH



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HEALTH DEPARTMENT,
ROYAL YORK BUILDINGS,
BRIGHTON, 1.

May, 1938.

LADIES AND GENTLEMEN,

I have pleasure in presenting my Annual Report for 1937. As I have explained in earlier reports, most of the information contained therein, its arrangement and the accompanying tables, are set out on the lines prescribed by the Ministry of Health. The report should only be used for reference to the particular subject in which the reader is interested (see Index, page 8).

During 1937, deaths exceeded births by 83. The infantile mortality continued low : 51 for Brighton, compared with 58 for England and Wales. The incidence of infectious disease was very low : scarlet fever 0·58 for Brighton, 2·33 for England and Wales. The corresponding figures for diphtheria were 0·59 and 1·49.

The most startling occurrence of the year was an outbreak of waterborne typhoid fever in Croydon which called attention to the need of sterilisation of water when men are at work in the headings. Distinguished medical men thought the occasion opportune to call attention to the need of closer co-operation between the Medical Officer of Health and general practitioners. As a matter of fact, the general practitioners of Croydon were told of the outbreak quite early so that they might be on the look-out for further cases, and every assistance was given to aid early diagnosis; further co-operation could not have lessened the outbreak by a single case and could not have led to earlier diagnosis or speedier or better treatment. It seems a pity that those distinguished men thought fit to introduce irrelevant matter both before and at the Inquiry, as the effect must be to make the Medical Officers of Health suspicious of the interference of busybodies with their work for which they are responsible and in which they are expert.

Maternity and Child Welfare.—Whilst with improvement in the standard of living infantile mortality has steadily fallen from 1900 onwards, maternal mortality has remained stationary. The absence of any fall in the latter was attributed to the inefficiency of the midwife. To remedy this the Central Midwives Board was constituted under the Midwives Act, 1902. Its duties were to publish a roll of certified midwives to control the conduct of their work and to frame rules as to the training of probationer midwives. As a result, the training of midwives has been lengthened and their responsibilities curtailed by rules requiring them to call in a doctor if any abnormality or complication is suspected. In spite of longer training and in spite of the immediate calling in of the general practitioner in case of complication, the maternal mortality remained stationary. Instead of coming to the obvious conclusion that it was not the midwife or her training that was at fault, our legislators decided that the probationer midwife must have a still longer course of training. I cannot see how this step is likely to lower maternal mortality, although the training will certainly be more costly. One thing, however, which has general approval is the appointment of whole-time municipal midwives who will gradually replace

part-time midwives, who often attended only a few cases each year and, in fact, had too little practice to make and keep them expert in their work. No doubt benefit will result from the employment of whole-time fully employed midwives, but even so there is ample evidence that no great fall will occur in maternal mortality until general practitioners who have had special experience in midwifery and who are devoting a considerable part of their time to the work, are available to be called in by the midwives to complicated labour cases. It is unfair to expect the general practitioner who has had no special experience and who is only called in occasionally to complicated cases to deal competently with all emergencies. It is difficult to understand under the circumstances why steps are not taken to provide the skilled treatment required.

A great deal of good work is being done at ante-natal and, more recently, at post-natal clinics, and more and more women find it convenient to go to hospital to be confined. If the work at the clinics and in the hospitals is well done by experienced practitioners, there is no doubt that great benefit will accrue not only in safer confinement but in a reduction of invaliding after effects. I must note here that in hospital there is a great risk of occasional, but disastrous, outbreaks of rapidly spreading streptococcal infections except continuous care is taken to avoid the introduction of infection; overcrowding should not be allowed even if patients have to be refused admission.

Unhealthy Houses.—Since the War, 1,231 houses have been condemned, 1,115 in unhealthy areas and 116 as single houses. These houses contained a population of some 5,500 persons (see pages 66 and 67). Personally, I had hoped first to complete the representation of unhealthy areas which would have included some of the worst basements, but the Council decided on a still more active housing policy and two additional sanitary inspectors began work in September, 1937, their duty being to inspect basements. Our chief difficulty now, as always, is to satisfactorily re-house the families displaced. I have expressed my views on re-housing in a recent report to the Housing Committee (see Appendix III.).

Old Complaints.—I have to call attention to certain subjects to which I have repeatedly referred in previous reports but with regard to which, unfortunately, the Central Authorities seem powerless or find it politically inconvenient to take effective action. The following are urgent matters calling for reform or publicity :

Vaccination.—The present pseudo-compulsory system characterised by one-mark vaccination is discredited by everyone who has gone fully into the matter. It certainly gives no long protection against attack, and the only problematical advantage is that primary vaccination of infants is less likely to be followed by post-vaccinal encephalitis than primary vaccination in older children and adolescents. In this country all that is necessary to control the spread of smallpox is to give the Medical Officer of Health surveillance over contacts and control of the movements of vagrant contacts. Compulsory vaccination should be abolished and should be advised only in cases where there has been actual contact with the disease; if contacts are vaccinated within 48 hours of infection, the attack can be prevented with certainty. In 1936 three deaths were reported from post-vaccinal encephalitis (a form of sleepy sickness following vaccination); not one of the persons whose lives were unnecessarily sacrificed

had been in contact with smallpox, and the chances are that they would never have been, and yet I am told there is no prospect of abolition of the present system and the introduction of effective measures to control outbreaks.

Cheap Nutritious Foods.—There is a prevalent idea that the working-class mother does not know how best to expend money on food. The reason the children of the poor are not properly nourished is, however, not due to the ignorance of the mother, but to the fact that dairy products, milk, eggs, butter, etc., which should figure prominently in the diet, are too expensive for large families with limited incomes. So little is this recognised that at the evening reception on the opening day of the great health publicity campaign it was stated that “it may be that the child doesn’t like milk or that the mother thinks that because the milk is so cheap it must be nasty too.” The speaker evidently did not appreciate the difficulties of the working-class mother who has to cater for a large family, and surely did not know that milk was dearer in England than in any other country in Europe. If, instead of making inaccurate statements, our politicians took steps to assist and advise mothers as to how to obtain *cheap* nutritious foods, they would be employing their time to better purpose.

The Vitaminised Margarines of reputable firms are much cheaper and are as valuable foods as butter, and yet it is the fashion to decry margarines of all kinds.

Skimmed Milk contains all the proteins, sugars, and salts of whole milk and was, until recently, used largely in weak tea and for puddings by working-class mothers to the great benefit of their children. In spite of the urgent need of many poor families for this cheap and highly nutritious food, steps have been deliberately taken to stop its sale in liquid form; whole milk for separation is sold at reduced prices varying according to the use made of the products as cream, butter, etc. Considerable amounts of separated milk are sold for pig food, at a penny a gallon. Even for the canteens, separated milk cannot be had at the price it is sold for pig food. Part is converted into dried milk, cheese, etc., a small part is used in the making of milk bread, some finds its way to casein factories, but much of it is poured down the drains, particularly in summer. So long as numbers of people in this country remain under-fed, this wastage of first-class proteins should be made a legal offence.

Pasteurised Milk is *safe* milk. Because all milk is not pasteurised, many outbreaks of infectious disease occur each year, and numbers are infected with tuberculosis. It is well known that the cleanest milks may convey these diseases, and yet we have those opposed to pasteurisation continually urging clean in preference to safe milk. Their success in deceiving themselves and the public may be partly due to the misleading slogan “Where there is dirt there is danger.” In the Brighton and Hove milk outbreak of sore throat in 1929 the milk at fault was a particularly clean milk although it carried the specific infection. Dirt lowers the keeping qualities of milk but does not render the milk dangerous by the spread of infection. The medical profession at one time believed that air escaping from sewers and bad smells from decaying matter gave rise to sore throat and diphtheria, and even now I receive hysterical letters calling attention to nuisances “from which we are sure to have a big outbreak of infectious disease.” Notwithstanding the present confused ideas on the subject,

more and more is pasteurised milk displacing raw milk, and there is some hope that local option may be granted in the matter.

Other Matters of Interest.—*Diet* in the chronic rheumatisms is important. Many sufferers mistakenly believe that they should not eat meat. Whilst in gouty arthritis an abstemious diet is indicated, ample supplies of meat are usually essential to combat the anaemia and debility so frequently present in chronic rheumatism. Many authorities advise a reduction of the starches (bread, pastry, potatoes) and sugars, and increased supplies of fruit and green vegetables.

THE EXCLUSION OF HOME CONTACTS FROM SCHOOL :

(a) *Measles*.—Many believe that the way to prevent the spread of measles is by the exclusion of contacts from school. In Brighton, since 1923, contacts have not been excluded, and your Medical Officer of Health like other pioneers has been exposed to much criticism, just as happened when he was the first in this country to substitute the Spring Clean for routine disinfection in 1910. Fortunately, the London County Council in the last and present outbreaks have followed non-exclusion policy, and in time the Board of Education and the Ministry of Health may see their way to revise their rules as to exclusion of contacts. The fact is that more children at the dangerous ages of 1—3 are infected when contacts are excluded from school, also the spread in the school is not materially decreased by the exclusion of home contacts.

(b) *Scarlet Fever*.—In times gone by, when a scarlet fever patient was nursed at home the custom was to exclude all home contacts from school until one week after the patient was declared to be free from infection and disinfection had been carried out. Because of the greater number of complications in cases nursed in hospital and the greater number of return cases after discharge, our policy from 1920 onwards was to reduce the number of cases admitted to hospital and in fact, whereas in 1920 90% of notified cases were admitted, in 1925 73%, and in 1930 61% were admitted. Then, in October, 1931, the Health Committee decided to remove no case of scarlet fever to hospital if a separate bedroom could be spared for the patient or the patient and the mother. This led to a further fall in the percentage removal to 54% in 1932, with a great loss of school attendance by home contacts. Because of this loss of school attendance, which I regarded as unnecessary, it was decided in 1932 to allow home contacts to return to school on the Monday week following the isolation of the patient, whether at home or in hospital; this period has recently been reduced to one week. Under the new rules the attendance at school of children coming from homes where scarlet fever patients were being nursed has not led to any spread of infection in school as was feared.

It is interesting to note that in 1934, when we had an exceptional incidence of scarlet fever in Brighton, the percentage removal fell to 44%, and that the percentage removal in the last two or three years has remained stationary around 45% (see *Lancet*, June, 1936).

Increased Clerical Work.—Sir Arthur Collins, the well-known accountant, states that the proof that a section of costing work is justified by practical results should always lie as an onus to be discharged by the officer responsible for the accounting work, and generally speaking Sir Arthur's conviction is that a close scrutiny of expenditure on costing work may show clearly that some costing work can be cut out with net saving even if some relatively

small allowance be made for leakage thereby going undetected (*Municipal Review*, July, 1935). The above extract refers to accountancy work, but is equally applicable to clerical work in every department of local government service. Every administrator is rightly anxious to frame schemes so that possible errors are reduced to a minimum. So anxious are some administrators on framing the perfect scheme that they overlook the fact that the cost of their watertight scheme far exceeds the benefits which can possibly result from the elimination of occasional errors.

Sometimes I wonder what becomes of the mass of tabulated information which each year is sent from the Health Office to the Ministry of Health, and if in any case any corresponding gain such as a betterment of the health of the town or country results. Again I find that the work of the health department is being continually increased by fresh legislation. Some of this is most desirable, particularly in so far as it brings old laws up to date ; on the other hand, one has at times an uneasy feeling that our legislators do not always ascertain the balance between the cost and the benefits likely to accrue from fresh legislation. As in totalitarian states, so in this country, there should be " purges," and so far as the work of the Ministry of Health and the Health Services goes, the first purge should eliminate all clerical work which cannot be shown to pay its way. During the purge, health authorities should not be worried by new Acts, Regulations, or Circular Letters, so that they may concentrate on testing out the value of our clogging clerical work with a view to the elimination of everything that is unnecessary. As a result, I feel sure that many out-of-date practices, such as Compulsory Vaccination, would be abolished, and that the returns required by the Ministry would be greatly reduced in number and in needlessly elaborate detail. Considering that a great strain is being thrown on the finances of the nation by increased armament and continuously increasing social services, the time is opportune for the abandonment of all unnecessary work and records.

I am,

Yours obediently,

DUNCAN FORBES.

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MEMBERS OF COMMITTEES ON 31st DECEMBER, 1937.

Health Committee :

Chairman : COUNCILLOR TALBOT NANSON.

HIS WORSHIP THE MAYOR (ALDERMAN HONE).	COUNCILLOR DUDENEY.
ALDERMAN BLACK.	„ SIR CHARLES GREY, BART.
„ BURBERRY.	„ ILLMAN.
„ DENNE.	„ LARKIN.
„ Miss HARDY.	„ Mrs. RICHARDS.
„ MAJOR.	„ Miss STRINGER.
COUNCILLOR BRIGGS.	

Children's Care Sub-Committee :

Chairman : ALDERMAN HUGGETT.

HIS WORSHIP THE MAYOR (ALDERMAN HONE).	COUNCILLOR MOORE-LYNCH.
THE CHAIRMAN OF THE EDUCATION COMMITTEE (ALDERMAN DENNE).	„ ROBBINS.
COUNCILLOR COOKE.	„ Mrs. RICHARDS.
„ HUSSEY.	„ Miss STRINGER.
„ INGHAM.	Mrs. A. G. BECKETT.
	Mr. G. BOSSON.
	Mr. G. BOX.
	Miss R. E. HASTINGS.

Blind Persons Act Sub-Committee :

Chairman : COUNCILLOR BRIGGS.

HIS WORSHIP THE MAYOR (ALDERMAN HONE).	COUNCILLOR LARKIN.
ALDERMAN BLACK.	„ Mrs. RICHARDS.
„ DENNE.	Mr. C. CASHMAN.
„ Miss HARDY.	Mr. S. HUGHES.
COUNCILLOR TALBOT NANSON.	Miss J. MANNALL.
„ SIR CHARLES GREY, BART.	Miss E. MUNRO RITCHIE.

Municipal Hospital Sub-Committee :

Chairman : ALDERMAN MISS HARDY.

HIS WORSHIP THE MAYOR (ALDERMAN HONE).	COUNCILLOR SIR CHARLES GREY, BART.
ALDERMAN DENNE.	„ ILLMAN.
COUNCILLOR TALBOT NANSON.	„ LARKIN.
„ BRIGGS.	„ Miss STRINGER.

PUBLIC HEALTH OFFICERS

on 31st DECEMBER, 1937.

1.—MEDICAL.

DUNCAN FORBES, M.D., B.Sc., D.P.H., Medical Officer of Health.
 RUTHERFORD CRAMB, M.B., Ch.B., D.P.H., Deputy.
 A. NEVILLE COX, M.D., M.R.C.P., Tuberculosis Officer.
 Miss M. F. BIGNOLD, M.B., Ch.B., Maternity and Child Welfare.
 F. H. LAWSON, M.R.C.S., L.R.C.P., Venereal Disease Clinic (part-time).
 D. J. N. McNAB, M.B., Ch.B., D.P.H., Senior Resident, Borough Sanatorium.
 A. M. FRASER, L.R.C.P. & S.E., D.P.H., Junior Resident Borough Sanatorium.

Municipal Hospital.

S. J. FIRTH, M.D., M.R.C.S., D.P.H., Medical Superintendent.
 A. G. B. FENWICK, L.M.S.S.A., Senior Resident Assistant Medical Officer.
 B. P. FUNDER, M.B., B.S., F.R.C.S., Second Resident Assistant.
 F. BOYD, M.B., B.Ch., B.A.O., Third Resident Assistant.
 H. J. McCURRICH, M.S., F.R.C.S., Visiting Surgeon Specialist.
 J. R. GRIFFITH, F.R.C.S., Deputy Visiting Surgeon Specialist.
 C. GUY WHORLOW, L.R.C.P., M.R.C.S., D.M.R. and E., Radiologist (part-time).
 E. V. OULTON, M.B., B.Ch., M.R.C.S., D.O.M.S., Ophthalmic Surgeon (part-time).
 Miss D. CAREW HUNT, M.D., B.S., Anaesthetist (part-time).
 D. A. CROW, M.B., Ch.B., Aural Surgeon.
 J. H. TWISTON DAVIES, M.B., B.Ch., Dermatologist.
 Mrs. LILIAS M. JEFFRIES, M.D., B.S., Gynaecologist.

} Consultants.

Public Vaccinators.

J. H. VANCE, M.B., B.Ch. G. GARLAND, M.R.C.S., L.R.C.P.

District Poor Law Medical Officers.

C. WRIGHT, M.R.C.S., L.R.C.P. T. A. MORRISON, M.B., Ch.B.
 D. L. BROWN, M.B., Ch.B. G. GARLAND, M.R.C.S., L.R.C.P.

2.—OTHERS.

B. A. HOLMES-SIEDLE, L.D.S., R.C.S., Dental Surgeon at Municipal Hospital (part-time).
 S. ALLINSON WOODHEAD, F.I.C., D.S.C., Public Analyst (part-time).
 S. GOURLEY, M.R.C.V.S., Veterinary Officer (part-time).
 A. H. HOLT, Chief Sanitary Inspector.
 R. W. GRUTCHFIELD, Chief Clerk, Public Health Department.
 C. E. GREENFIELD, Superintendent of Public Abattoir and Food Inspector.
 R. S. CROSS, Inspector under Factory and Workshops Acts and Shops Acts.
 J. BAKER, Infectious Disease Visitor.
 A. J. FRANKS, A. J. TAYLOR, A. J. MORTIMER, J. C. FEARON,
 G. V. MARTIN, W. H. KARSLAKE, H. G. GIBSON, C. A. BRACE,
 P. A. FREESTONE, F. C. HILLS, R. G. CHAMBERS, District Sanitary Inspectors.
 P. I. HUNT, Steward, Municipal Hospital.
 Miss M. F. DYKES, Matron, Municipal Hospital.
 Miss M. GIBSON, Matron, Borough Sanatorium.
 Misses A. E. WHYTE, F. M. LOGIE, F. E. HAYES, A. CORRELL, W. L. ANDERSON, H. M. NIXON, Health Visitors and Infant Life Protection Officers.
 Miss A. EDDY, Health Visitor, Infant Life Protection Officer and part-time Tuberculosis Visitor.
 Miss F. L. GRAY, Tuberculosis Visitor.
 Mrs. A. H. RYMAN, Miss W. M. HELLMUTH, Municipal Midwives.

*Registrar General's estimated figure.

Vaccination.

Vaccination of children whose births were registered during year ended 31st December, 1936 :—

Number of births registered	...	...	...	...	...	2330
Successfully vaccinated (26 per cent.)	...	...	...	...	...	602
Insusceptible of vaccination	...	...	...	...	...	8
Number in respect of whom Statutory Declarations of Conscientious Objection were received	...	...	...	...	...	1409
Died unvaccinated	...	...	...	...	...	99
Postponement by medical certificate	...	...	...	...	...	6
Removed to other districts, the Vaccination Officers of which have been apprised	...	...	...	...	...	99
Removed to places unknown	...	...	...	...	...	105
Not accounted for	...	...	...	...	...	2
Total number of Certificates of successful primary vaccination of children under 14 received during year ended 31st December, 1937	...	...	...	...	...	632
Number of Statutory Declarations of Conscientious Objection actually received during year ended 31st December, 1937	...	...	...	...	...	1382
Number of persons successfully vaccinated and re-vaccinated at the cost of the rates during year ended 30th September, 1937 :—						

Primary vaccinations of persons—

Under 1 year of age	...	380	} 448
1 year and upwards	...	68	

Re-vaccinations 14

No proceedings had to be taken under the Vaccination Act, 1867.

No vaccinations were carried out by the Medical Officer of Health under the P.H. (Small-pox Prevention) Regulations, 1917. No case of post-vaccinal encephalitis was reported during the year.

Diphtheria.—Extent of immunizations against diphtheria.

At Sanatorium :—Children in-patients	...	...	...	11
Nursing staff	...	...	...	15
In connection with Maternity and Child Welfare Scheme :—				
School children (125) and under school age (151)	...	...	...	276
At Residential Schools	...	...	...	57

Two deaths occurred from diphtheria in Brighton, giving a percentage mortality of 2·3.

24,000 units of antitoxin were given by the Health Department to three doctors for administration to three necessitous patients.

Scarlet Fever.—Of a total of 85 patients notified, 39, or 46%, were removed to hospital. Two of the hospital-nursed cases gave rise to return cases, whilst none of the home-nursed cases gave rise to infection after their period of isolation at home.

Measles.—During 1937 there were only 28 known cases, among whom there were no deaths. No schools were closed.

Whooping Cough.

725 cases were visited in 488 houses ; 8 deaths occurred.

Home Nursing.

48 visits were made by the Queen's Nurses to 3 cases of measles and 293 visits to 16 cases of whooping cough.

Scabies and Verminous Cases.

The following were treated at the Elm Grove Home :—142 cases of scabies and 26 verminous cases, of whom 5 were cleansed under the P.H. Act.

THE SANATORIUM.

Number of Patients.	Number of Patients suffering from the following Diseases :—															Total.
	Scarlet Fever.	Typhoid Fever.	Diphtheria (including carriers).	Puerperal Fever or Pyrexia.	Acute Anterior-poliomyelitis.	Cerebro-Spinal Fever.	Encephalitis Lethargica.	Measles and German Measles.	Ophthalmia Neonatorum.	Chicken Pox.	Pulmonary Tuberculosis.	Other Tuberculous Diseases.	Orthopaedic (Not T.B. or A.A.P.).	Kept in after operations for Tonsils and Adenoids.	Other Diseases.	
Remaining December 31st, 1936	5	1	16	—	—	1	—	—	—	—	41	7	3	—	—	74
Admitted in 1937	61	6	151	12	10	6	—	2	4	4	94	22	6	255	22	655
Total number treated 1937 ...	66	7	167	12	10	7	—	2	4	4	135	29	9	255	22	729
Discharged in 1937	61	6	147	10	4	3	—	1	4	2	94	18	5	255	13	623
Died in 1937	—	—	*3	—	—	4	—	—	—	—	†14	—	—	—	4	25
Remaining December 31st, 1937	5	1	17	2	6	—	—	1	—	2	27	11	4	—	5	81
Total Weeks	307	59	1119	63	116	26	—	3	14	12	2192	506	130	41	63	4651
Average stay in weeks	5.0	9.8	7.4	5.7	17	3.7	—	1.5	3.5	4.0	15	19	14	1 day	2.6	6.4

*One death due to diabetic coma.

†One death due to carcinoma of liver.

Of the admissions, 2 cases of diphtheria, 1 of chicken pox, and 4 of other diseases belonged to the Sanatorium Staff.

Thirteen patients suffering from scarlet fever, 5 from typhoid fever, 6 from diphtheria, 3 from puerperal fever or pyrexia, 1 from acute anterior poliomyelitis, and 1 from another disease, were admitted from districts outside Brighton.

LABORATORY REPORT.

Swabs sent by:—

		Positive.	Negative.	Doubtful.	No Growth.	Total.
General Practitioners	...	64	572	—	—	636
Hospitals	...	17	314	—	4	335
Medical Officer of Health	...	166	408	—	—	574
School Medical Officer	...	19	50	—	—	69

Sanatorium Swabs:—

Admission Diphtheria	...	91	143	—	—	234
Convalescent Diphtheria	...	371	1106	—	—	1477
Admission Scarlet Fever	...	3	87	—	—	90
Convalescent Scarlet Fever	...	9	21	—	—	30

Sputa sent by:—

					Positive.	Negative.	Total.
General Practitioners	...	...	...	...	27	244	271
Hospitals	...	...	...	...	61	150	211
Tuberculosis Clinic	...	...	...	...	22	102	124
Sanatorium	...	...	...	...	200	123	323

Examination of spinal fluid:—

		Tubercle.	Meningococci.	Negative.	Total.
Sanatorium In-patients	...	—	5	1	6

Blood Specimens, Widal's

Reaction:—*					Positive.	Negative.	Total.
From Borough	...	...	...	...	—	1	1
From Sanatorium	...	...	...	...	4	6	10

Puerperal Fever:—

			Contaminations.	Positive.†	Negative.	Total.
Blood cultures	—	—	—	—
Cervical swabs	—	2	8	10

Hairs examined for Tinea:—

				Positive.	Negative.	Total.
From School Clinic	...	...	...	2	3	5
From Infant Welfare Department	...	...	...	—	1	1

Bacteriological Examinations of Sources of Water Supply:—

Falmer, 11 ; Goldstone, 25 ; Mile Oak, 43 ; Patcham, 11 ; Shoreham, 13 ;
Balsdean, 11.

Other Bacteriological Examinations of Waters:—27.

Total number of examinations for year :—4,548.

*Includes bacillus typhosus, Para A, B, and the bacillus abortus ; all of the 11 specimens tested for bacillus abortus proved negative.

†Refers to Streptococcus Haemolyticus.

POOR LAW OUT-RELIEF.

The amount of out-relief administered for the year in the County Borough was £44,000.

HOSPITAL ACCOMMODATION.

Name of Hospital.	NUMBER OF BEDS.				No. of In-patients treated in 1937.	OUT-PATIENTS, 1937.	
	Surgical	Medical	Gynaecological.	Total		No. of patients	No. of Attendances
(a) Voluntary	M. F.	M. F.				(excluding V.D. patients, see p. 26)	
Royal Sussex County Hospital ...	94 69 Children 17	35 34 Children 9	14	272	3892	19298§	128761§
Royal Alexandra Hospital (for children) ...	15 17 Infants either	15 18 sex 26	— 10 Isolation	101	1190	2449	18278
New Sussex Hospital for Women ...	25 Private Wards (S.&M.) Convalescent (S.&M.)	15 13 7	— 13 7	60	9 2	4212	25336
Sussex Eye Hospital	8 8 Children (S. & M.) Private Wards (S.&M.)	8 8 (S. & M.) 10	— 6 10	48	620	4849	19925
Throat and Ear Hospital ...	32	—	—	32	1137	2009	6825
*Sussex Maternity and Women's Hospital (excluding Hove Branch) ...	20 Maternity 6 Isolation		11	37	Maternity 436 Gynaecological 233	1305	6321
(b) Municipal							
The Municipal Hospital ...	Men 203	Women 309	Children 40	552	4407 Admissions.	1074††	3298††
The Fever Hospital ...		169		169	474‡	—	—
The Smallpox Hospital ...		14		14	—	—	—

* Beds reserved for Brighton midwifery patients.

† Sanatorium included in Fever Hospital, 81 beds being reserved for tuberculosis of all forms.

‡ Excluding patients kept in after operations for tonsils and adenoids.

§ In accordance with instructions contained in the new Revised Uniform System of Hospital Accounts and Statistics issued by the King Edward's Hospital Fund for London, these figures include casualties and other cases seen in the casualty and Special Departments.

†† No officially recognised out-patient department—patients continue to attend the Hospital subsequent to discharge principally for massage and electrical treatment.

TUBERCULOSIS.

The table below gives statistics of Tuberculosis for 1937.

	Number of deaths.	Rate per 100,000.	Number of new cases.	New cases per 100,000 of population.	Number of re-notifications.
Pulmonary Tuberculosis	99	67.48	160	109.06	43
Other forms Tuberculosis	17	11.59	59	40.22	10
All forms Tuberculosis	116	79.07	219	149.28	53

Age Periods.	New Cases				Deaths			
	Pulmonary		Other		Pulmonary		Other	
	M.	F.	M.	F.	M.	F.	M.	F.
0- 1	—	—	—	—	—	—	—	—
1- 4	—	—	5	5	—	—	3	1
5- 9	2	1	7	4	—	—	—	1
10-14	6	1	4	3	—	—	—	2
15-19	7	8	1	6	3	3	—	1
20-24	10	10	3	3	4	5	—	—
25-34	21	12	1	5	4	13	1	—
35-44	14	16	2	3	12	8	—	2
45-54	20	8	—	2	23	6	—	2
55-64	13	4	—	2	9	3	—	1
65 and upwards	4	3	—	3	2	4	2	1
Totals	97	63	23	36	57	42	6	11

Sixty-four of the total of 116 deaths occurred in hospitals, of which 40 were in the Municipal Hospital and 13 in the Sanatorium.

No action has been found to be necessary under Sec. 172 of the P.H. Act, 1936, Sec. 62 of the P.H. Act, 1925, or the T.B. Regulations, 1925.

MUNICIPAL CHEST CLINIC.

Some particulars of the work carried out at the Clinic :—

Examinations by the Tuberculosis Officer :—

New cases examined	...	...	...	...	...	442
Old cases re-examined	...	...	...	...	...	1459
X-ray examinations (includes 117 screenings)	...	...	...	...	...	401
Larynx examinations	...	...	...	...	...	65

Results of Clinical Examinations :—

DIAGNOSIS AS TO TUBERCLE.	Men.		Women.		Children.		Total.	
	New cases.	Old cases.	New cases.	Old cases.	New cases.	Old cases.	New cases.	Old cases.
Pulmonary	57	607	41	772	6	60	104	1439
Non-pulmonary	3	9	8	30	2	30	13	69
Not tuberculous	45	49	94	66	78	45	217	160
Doubtful, for further observation	36	66	39	90	33	101	108	257
Total Examinations ...	141	731	182	958	119	236	442	1925

Of the above, 55 were examined at the Sanatorium (out-patients), 132 in their homes, and 33 elsewhere. The remainder were examined at the Clinic.

The Origin of *new* cases examined was as follows :—

Sent by Doctors	248
Seen in consultation with Doctors	26
Contacts and others arranged by Visitor	117
Examined at request of patient or relatives	7
Referred from School Clinic	7
Referred from Infant Welfare Centres	7
Other sources	30

OTHER EXAMINATIONS AND TREATMENTS.

	TREATMENT AT CLINIC.		
	Total Patients.	New Patients.	Number of injections.
Pulmonary Tuberculosis	16	7	430
Other forms Tuberculosis	4	1	79
All forms Tuberculosis ...	20	8	509*

*This figure includes 334 subcutaneous injections of tuberculin and 175 intravenous injections (calcium and gold salts).

X-Ray Examinations at Sanatorium.

Radiograms taken :—

In-patients, 176 ; Out-patients, 161 ; Staff, 6 ; East Sussex patients, 49.
Total X-ray examinations, 392 (includes 28 screenings).

Treatment by Artificial Pneumothorax.

The aim of this treatment is to rest the affected part of the lung and, in suitable cases, it has proved to be of real and lasting benefit. Unfortunately it involves repeated refills over a prolonged period. 433 refills were given at the Clinic and 71 at the Sanatorium. (These figures refer only to out-patients.)

Chest Surgery.

Under this scheme, Mr. R. C. Brock, F.R.C.S., has made five visits during the year.

Operations performed :—

Phrenic evulsion	...	...	...	...	...	...	3
Phrenic crushing	...	...	...	...	...	...	3
Thoracoscopy and division of adhesions					...	...	7

In addition, one patient was transferred to Brompton Hospital and two to Papworth for major operations by Mr. Brock.

Artificial Light Treatment.

Artificial light treatment for out-patients was, as in former years, carried out by Miss Palmer, at 52 Old Steine.

Two men, six women, and four children received treatment during the year; the men made 87, the women 442, and the children 227 attendances.

Dental Treatment.

One of the School Dentists visits the Sanatorium each week and attends to the patients' teeth.

Voluntary Assistance.

We have continued to receive most valuable help at the Clinic from Miss Bayliss, of the St. John's Ambulance Association, and also from the Queen's Nurses.

AFTER CARE.

Home Nursing by Queen's Nurses :—

4,565 visits were made to 52 Pulmonary Tuberculosis patients.
635 visits were made to 18 Non-Pulmonary Tuberculosis patients.
Total, 5,200 visits to 70 patients.

Two bedsteads with bedding were lent to enable patients to sleep alone.

During the year five open-air shelters were provided and four are still in use.

The following number of patients have been re-housed :—

1 on Manor Farm Estate; 2 at Whitehawk; 1 on Queens Park Estate; 3 on East Moulsecoomb Estate.

It is proposed to erect three-bedroomed houses with verandahs and slightly better accommodation on the East Moulsecoomb Estate, and some of them will be used for patients suffering from Tuberculosis.

Dr. Neville Cox has given two series of lectures on Tuberculosis to the Queen's Nurses.

Assistance from the Hedgcock Bequest.

	£	s.	d.
Milk	382	4	4
Assistance towards cost of living	96	0	2
Help whilst head of family in Sanatorium	81	7	6
Nursing and care	34	8	8
Better housing by assistance with rent	140	18	9
Removal expenses	1	1	6
Provision of boots and/or clothing	12	14	5
Boarding out of children	17	17	6
Maintenance in Hospitals and Homes	92	14	9
Provision of surgical appliances and dentures	23	17	11
Assistance towards cost of course at Technical College	10	10	0
Assistance towards cost of driving lessons	9	17	6
Expenses towards cost of funeral	6	4	2
Installation of wireless receiving set in Tb. wards at Sanatorium	36	9	6
Sanatorium Workshop (materials only)	38	16	6
	985	3	2
Less contributions recovered from patients towards cost of maintenance in hospital	15	0	0
	£970	3	2

ORTHOPAEDIC SCHEME.

	Attendances at Clinic.			Treatment in Royal National Orthopaedic Hospital.	
	For treatment.	To see Surgeon.	For observation.	No. of patients.	No. of weeks spent in hospital.
Tuberculosis cases ...	82	51	35	11	126
Infant Welfare cases	816	122	87	7	60
Education Committee cases	2039	302	169	13	102
Others	100	7	5	—	—
TOTAL ...	3037	482	296	31	288

In addition, tuberculosis cases spent 506 weeks, infantile paralysis cases 116 weeks, other cases 130 weeks in the orthopaedic ward of the Borough Sanatorium (see page 14).

(Also see pages 10 to 12 and 37 to 40 of the School Medical Report attached.)

MATERNITY AND CHILD WELFARE.

The total net live births registered numbered 1,940, of which 983 were males and 957 females. Included in the total are 154 illegitimate births. The infant mortality was 51 per thousand : (for notifications of births see page 48).

MIDWIVES.

During 1937, 46 midwives notified their intention to practise in the area ; of the 20 in private practice 3 did not practise at all, and 2 were in practice for a short time only. Of the total, 45 had passed a qualifying examination and 1 was in practice prior to the passing of the Act in 1901 (this midwife has since died).

The number of visits paid to midwives was 63 ; to all private midwives while living and practising in Brighton at least one visit was paid quarterly.

Two Municipal midwives were appointed under the provisions of the Midwives Act, 1936, and commenced their duties on 4th October, 1937. From then until the end of the year they attended 28 cases as midwives and 2 as maternity nurses. For Scheme made under this Act see Appendix I., page 60.

MEDICAL HELP CALLED IN.

	TOTAL.	Private Cases.	Hospital District Cases.		TOTAL	Private Cases.	Hospital District Cases.
<i>Pregnancy—</i>				<i>Lying-in Period (Mother)—</i>	161	85	76
Miscarriage	2	—	2	Rise of Temperature	16	3	13
Haemorrhage (A.P.)	9	4	5	Other reasons	19	1	18
Albuminuria	6	6	—	<i>Condition of Infant—</i>			
Threatened Miscarriage	3	2	1	Premature Birth	9	4	5
Other reasons	7	6	1	Condition of Baby	26	6	20
<i>Labour—</i>				Discharge from eyes	60	11	49
Breech Cases	6	4	2	Malformation	1	—	1
Face presentation	2	1	1	<i>Other notifications (Rule 22)—</i>			
Abnormal presentation	2	—	2	Substitution artificial for			
Prolapse of cord	3	1	2	breast feeding	14	3	11
Delay in Labour	41	21	20	Stillbirth	8	2	6
Retention of Placenta	3	2	1	Possible source of infection	7	3	4
Rupture of Perineum	65	32	33	Laid out dead body	4	1	3
Haemorrhage (P.P.)	2	1	1	Death of child	2	—	2
Other reasons (mother)	10	5	5				
	161	85	76		327	119	208

During the year, £88/17/6 was paid by the Council to doctors called in by midwives on 75 occasions, and during the same period £54 was recovered from patients.

SUSSEX MATERNITY AND WOMEN'S HOSPITAL.

The staff of certified midwives at this Hospital and its three branches numbers 23. The total number of confinements attended was 684; of this total 550 belonged to Brighton, 120 being primiparae and 430 being multiparae. Forty-eight pupils were trained during 1937, all of whom obtained the Certificate of the Central Midwives Board. Each pupil attended an Infant Welfare Centre on five occasions during her training. Wards containing 26 beds are set aside for maternity cases.

At the ante-natal clinic 4,921 examinations were made (Brighton cases).

Under agreement, 58 Brighton patients were admitted during the year; the number of in-patients days was 1,002. The Council pays the Hospital 9/- a day for each of these patients. The total cost was £451, of which £215 was paid by the patients and the Sussex Provident Scheme.

The assigned reasons for the admission of the patients were as follows :—

Albuminuria	...	...	...	10	Ruptured ectopic gestation	...	1
Induction	...	...	...	6	Obstructed labour	...	3
Ante-partum haemorrhage	...	...	...	8	Hyperemesis	...	4
Breech cases	...	...	...	3	Other reasons	...	4
Disproportion	...	...	...	7			—
Instruments required	...	...	...	2	Total	...	58
Caesarean section	...	...	...	10			—

PUBLIC HEALTH ACT, 1936, SECTION 187.

The number of nursing homes on the Register on 31st December, 1937, was as follows :—Maternity Homes 6, other Homes 15, combined Maternity and other Homes 5. All the Homes are visited at least twice in the year.

ANTE-NATAL CLINICS.

There are three Clinics :—

(1) At the Sussex Maternity and Women's Hospital (see above).

(2) At the Brighton Municipal Hospital; 402 cases attended, who made 1,655 attendances. Forty-nine of these cases had already been seen at the Municipal Clinic.

(3) The Municipal Clinic, held on Monday and Tuesday mornings at 9.30 a.m. Private midwives send their patients to this Clinic, where they are seen by the Maternity and Child Welfare doctor, who is also Supervisor of Midwives. In addition, many of the patients who arrange to go into the Maternity Ward at the Municipal Hospital attend at this Clinic for their ante-natal care. Reports are sent to the midwife or to the Municipal Hospital each time a patient visits the Clinic.

During the year 584 patients were seen, who made 2,591 attendances. Twenty-four of these patients were not pregnant. Of the 560 others (314 multiparae and 246 primiparae) 395 were normal. The others suffered from :—

Bronchitis	...	...	...	2	Albuminuria	...	...	...	34
Heart disease	...	...	...	4	Excessive vomiting	...	...	...	4
Haemorrhage during pregnancy	...	...	...	2	Pyelitis	...	...	...	6
Haemorrhoids	...	...	...	3	Contracted pelvis	...	...	...	17
Leucorrhoea	...	...	...	6	Prolapse	...	...	...	6
Hydramnios	...	...	...	2	Twin pregnancy	...	...	...	4
General malaise	...	...	...	7	Breech presentation	...	...	...	28
Varicose veins	...	...	...	17	Occipito-posterior presentation	...	...	...	7
Death of foetus	...	...	...	3	Transverse presentation	...	...	...	6
					Others	...	...	...	7

Ninety-eight of the above cases were told that medical treatment was necessary. 115 cases otherwise normal were suffering from pyorrhoea and dental caries.

HOME VISITS.

Of 1,940 infants born during 1937 there were visited	...	...	1550
Average number of visits paid to each infant	...	...	5.9
No. of children of ages 1—5 visited	...	...	4300
Total inquiries <i>re</i> children 1—5	...	...	11767
No. of expectant mothers visited	...	...	576
Visits for investigation <i>re</i> cause of stillbirths	...	...	54
Visits for investigation <i>re</i> premature deaths	...	...	37
Visits in connection with Vaccination	...	...	376
Other visits	...	...	319
Total visits paid by Health Visitors during 1937	...	...	21446
(Excluding visits to foster children.)			

INFANT WELFARE CENTRES.

Attendance table for the Seven centres (each opens once weekly).

(The seventh centre was opened at Patcham on 2nd October, 1937.)

	Number.	Attend- ances.	Average attendance	
			per person	per session
Mothers ...	1980	18737	9	60
0-12 months ...	1626	13984	8	} 69
1-5 years ...	1168	7696	6	

DENTAL CLINIC.

Nursing and expectant mothers and children under five years are referred to this Clinic from the Antenatal Clinic and Infant Welfare Centres.

79.8 per cent. of the patients sent for kept their appointments.

During the year, 1,085 attendances were made by 112 mothers and 286 children under five years of age, on 145 afternoon sessions.

Summary of the work done :—

	Fillings.	EXTRACTIONS.		Scaling.	Other oper- ations.	DENTURES.		Repairs and ad- ditions.
		Nitrous oxide.	Local Anaes- thetic.			Partial.	Com- plete.	
Mothers	53	3	942	125	452	14	74	10
Children under 5	82	22	104	30	192	—	—	—
Totals ...	135	25	1046	155	644	14	74	10

EDUCATION OF STUDENTS.

During the year each of the 60 senior students training at the Municipal Training College for the profession of teaching attended one of the Infant Welfare Centres on two occasions, and so had an opportunity of becoming familiar with the actual work done.

Lecture demonstrations on the feeding and care of babies were given by the Health Visitors to girls who were about to leave school.

	Demonstrations.	No. of girls.
Elementary schools	33	693
Intermediate school	2	50
Technical College	1	17

Creches.—The two crèches are situated in Wellington Road and Manor Road, At Wellington Road the average number of children in daily attendance was 27 ; at Manor Road the corresponding number was 16.

Church Army Maternity Home.—Into this Home 32 expectant and nursing mothers were admitted during the 12 months ended 31st December, 1937. The number of confinements was 26 ; the average stay prior to confinement was 16 weeks ; after confinement, 12 weeks. The cases are usually of persons who do not belong to Brighton.

ASSISTANCE.

Milk for expectant and nursing mothers and children	£945 16 8
Dried Milk	23 16 8
Confinement fees	2 0 0
Home Helps	46 12 6
Dentures	10 16 0
	<hr/>
	£1029 1 10
	<hr/>

Cartons of Malt and Cod Liver Oil, costing £129, were given out at the Health Office ; £36 19s. 9d. was recovered as follows :—

	Paid.	Cartons distributed.
	£ s. d.	
School clinic patients	10 11 3	969
Tuberculosis patients	2 13 6	404
Infant Welfare cases	23 15 0	4529

The cartons, 1lb. size, are sold at 6d. each (free in necessitous cases) ; they contain a 25 per cent. emulsion of cod liver oil in malt.

OPHTHALMIA NEONATORUM.

Notified.	TREATMENT.		Vision unimpaired	Vision impaired.	Gonococci found in Swab.
	At home.	In hospital.			
7	3	4	7	—	1

Seven cases were notified, of which five were mild. Two were nursed at home by the Queen's Nurses. Three, including the case of gonorrhoeal ophthalmia, died within a few months; two being weakly premature infants.

The practice of the routine instillation of drops of Argyrol (ten per cent. strength) into the eyes of infants at birth has been continued.

PUBLIC HEALTH ACT, 1936, PART VII.

The visiting of foster-children under nine years of age is done by the Health Visitors.

Number of foster-mothers on 31st December, 1937	...	...	104
„ foster-children	„	„	138
Total visits paid during 1937	...	...	1233

One person was prosecuted for refusing to admit the Health Visitor. After adjournment the visitor was admitted.

CONTRACEPTIVE CLINIC.

As can be gathered from the statement below, a large number of the cases are recommended by general medical practitioners:

New cases treated during 1937 belonging to Brighton :—

Sent by Tuberculosis Clinic	...	...	10
„ „ Maternity and Child Welfare Department	...	...	1
„ „ General Medical Practitioners	...	...	12
Total	...	...	23

Total number of attendances of all Brighton cases during year 73

Classification of new cases :—

Tuberculosis (husband or wife)	...	...	10
Cardiac	...	...	3
Albuminuria	...	...	1
Retinitis pigmentosa	...	...	1
Breast abscess	...	...	1
Pelvic disease or deformity	...	...	2
Varicose veins	...	...	1
Anaemia and debility	...	...	2
Mental condition (husband or wife)	...	...	2
			23

In addition 55 attendances were made by 30 new cases belonging to districts outside Brighton. Total number of attendances of all cases belonging to districts outside Brighton was 65.

VENEREAL DISEASE.

STILL BIRTHS.

Up to the end of 1937, sections of the livers have been examined in 432 cases, of which 13 or 3·0 per cent. showed spirochetes.

THE BRIGHTON V.D. TREATMENT CENTRE.

New Brighton Cases treated during 1937.

Syphilis.		Gon.		Soft Sore		Sy. and S.S.		Sy. and Gon.		Gon. and S.S.		Sy., G., S.S.		Conditions other than V.D.		Total of V.D. Cases	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
17	17	70	29	2	—	—	—	2	—	—	—	—	—	107	60	91	46

Return relating to all persons who were treated at the Treatment Centre.

	Syphilis		Soft Chancre.		Gonorrhœa		Conditions other than venereal.	
	M.	F.	M.	F.	M.	F.	M.	F.
1. Number of cases on 1st January under treatment or observation	192	160	—	—	108	35	36	8
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection ...	5	3	—	—	1	—	—	—
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from :—								
Syphilis, primary	5	2	—	—	—	—	—	—
„ secondary	4	2	—	—	—	—	—	—
„ latent in 1st year of infection ...	3	5	—	—	—	—	—	—
„ all later stages	28	19	—	—	—	—	—	—
„ congenital	3	4	—	—	—	—	—	—
Soft Chancre	—	—	5	—	—	—	—	—
Gonorrhœa, 1st year of infection ...	—	—	—	—	117	42	—	—
„ later	—	—	—	—	2	5	—	—
Conditions other than venereal	—	—	—	—	—	—	196	127
4. Number of cases dealt with for the first time during the year under report known to have received treatment at other Centres for the same infection	24	15	—	—	53	9	1	3
TOTALS OF ITEMS 1, 2, 3 AND 4 ...	264	210	5	—	281	91	233	138

Statement showing the services rendered at the Treatment Centre during the year, classified according to the areas in which the patients resided.

Name of County or County Borough.	Brighton.	East Sussex.	West Sussex.	Other Districts.	Total.
Number of cases in Items 3 and 4 from each area found to be suffering from :—					
Syphilis	37	24	13	1	75
Soft Chancre	2	1	2	—	5
Gonorrhœa	100	47	17	2	166
Conditions other than venereal	167	101	44	11	323
TOTAL	306	173	76	14	569

Attendances were made at the female sessions of the Clinic during the year by 71 pupils from the Sussex Maternity and Women's Hospital, Buckingham Road.

ANNUAL RETURN FROM PATHOLOGICAL LABORATORY.

Pathological examinations made in the Stephen Ralli Memorial Laboratory by Dr. Janes, during the year ending on the 31st December, 1937, relating to persons residing in the County Borough of Brighton.

NATURE OF TEST.	TREATMENT CENTRE.		PRACTITIONERS.	
	Positive.	Negative.	Positive.	Negative.
For Spirochetes	3	2	—	20
For Gonococci	190	903	5	103
For Wasserman Reaction...	244	683	26	291
Other examinations	147		45	
Total	2662			

Dr. Lawson, the Medical Officer to the V.D. Clinic, made 23 dark ground examinations, of which 5 gave positive results.

I set out below a return from which a better judgment can be made as to the source of the specimens than from the official form of the Ministry.

SOURCE OF V.D. SPECIMENS EXAMINED AT THE LABORATORY.

From the V.D. Centre	...	...	...	...	...	2172
From Consultants and Specialists in V.D. work from patients seen and treated privately	...	...	...	...	...	103
From Medical Officers in health services	...	...	...	...	...	63
From Hospitals	...	...	...	...	...	288
From nineteen General Practitioners, four of whom are on Hospital staff	...	...	...	...	...	36

The above figures shew that whilst over 200 specimens are examined each month, only 1.4 per cent. of the whole are taken by the general practitioner.

That the general practitioner does not see or does not treat syphilis to any extent is strongly evidenced by the fact that no dose of Salvarsan substitute for administration in private practice was applied for.

CLINICS FOR NERVOUS DISORDERS.

I have not received any report from Dr. Harper Smith on the work done by him during 1937.

Dr. C. Lamorna Hingston has kindly classified the 114 new cases seen by her at the Nervous Clinic held at the Royal Sussex County Hospital :—

Psycho-neuroses, 70 ; Melancholia, 6 ; Manic-Depressive Group, 4 ; Schizoid States, 7 ; Paranoia, 1 ; Mentally Deficient, 3 ; Endocrine Imbalance, 1 ; Epilptiform States, 4 ; Traumatic Neuroses, 2 ; Exhaustion neurosis, 1 ; Behaviour, personality, or habit disorders in children, 6 ; Organic nervous disorders, 2 ; Physical disorders, 5 ; Undiagnosed, 2.

SANITARY ADMINISTRATION.

SANITARY INSPECTION.

In the following tables the work of the Sanitary Inspector's Section is stated, so far as possible in tabular form :—

Inspections for 1937.

NATURE OF INSPECTION.	Preliminary Inspection.	Re-inspection.	Total.
Houses under the Public Health Acts ...	2683	3977	6660
Houses under the Housing Acts ...	7301	1382	8683
Basements ...	1275	78	1353
Overcrowding Survey ...	1994	69	2063
Common Lodging Houses ...	51	2	53
Water Supply ...	7	—	7
Stable Premises ...	287	107	394
Cowsheds ...	287	13	300
Milkshops and Dairies ...	892	223	1115
Premises where Ice Cream is Manufactured or Sold ...	532	73	605
Butchers' Shops for Food Inspection ...	96	26	122
Markets and Cold Stores ...	307	56	363
Offensive Trades ...	146	91	237
Food Preparing Premises ...	141	56	197
Knacker's Yard ...	12	—	12
Marine Stores ...	6	—	6
Tents, Vans, and Sheds ...	58	—	58
Schools ...	4	1	5
Animals or Birds ...	73	2	75
Accumulations ...	196	127	323
Piggeries ...	147	3	150
Yards, Courts, and Passages ...	233	18	251
Closets (Water) ...	60	1	61
„ (Pails or Privies) ...	73	—	73
Cesspools ...	120	—	120
Urinals ...	175	—	175
Sewers and Street Gullies ...	12	2	14
Drainage Defective ...	115	16	131
Drainage Tested ...	17	2	19
Smoke Abatement Observations ...	90	10	100
Council House Applications ...	448	16	464
Merchandise Marks Acts ...	113	—	113
Licensed Premises ...	294	1	295
Verminous Premises ...	277	175	452
Rat-infested Premises or Land ...	419	271	690
Rat Baits Laid ...	—	—	4043
Letters sent to Schools and Public Libraries	—	—	1542
Sickness ...	—	—	3645
Disinfection of Rooms ...	—	—	66
For Removal of Bedding (including vermin infested) ...	51	—	236
Miscellaneous visits <i>re</i> Infectious Disease ...	—	—	2007
Rent Restriction Acts Certificates Issued ...	1	—	1
Miscellaneous Visits ...	—	—	3762
Interviews—Owners, Tradesmen Contractors, etc. ...	—	—	655

The sanitary inspections enumerated in the preceding table have been followed by the serving of the notices given in the next table. A large proportion of the work is done as a result of verbal recommendations or preliminary notices :—

	PUBLIC HEALTH ACTS.				Section 9 of the Housing Act, 1936.	Total.
	Warning and Verbal Notices Complied with.		Statutory Notices Served.			
	Owners.	Occupiers.	Owners.	Occupiers.		
To drain the premises into the common sewer	26	—	5	—	—	31
To re-lay the drain	4	—	2	—	—	6
To repair the drain	29	—	21	—	—	50
To clear the drain	59	—	15	—	—	74
To repair soil-pipes	2	—	—	—	—	2
To empty or cover cesspools, etc. ...	16	—	5	—	—	21
To provide new pans to closets	22	—	16	—	2	40
To provide the closet with a water supply	4	—	—	—	—	4
To repair flushing apparatus	54	—	42	—	3	99
To repair roofs, walls, seats or doors of W.C.'s	72	—	73	—	7	152
To cleanse closets or urinals	—	21	—	10	—	31
To pave or repave yards, sculleries or forecourts	65	—	119	—	13	197
To remove accumulations	—	76	—	27	—	103
To discontinue keeping animals so as to be a nuisance	—	9	—	1	—	10
To provide new galvanized dustbins ...	243	—	110	—	—	353
To discontinue using ashpits and provide galvanized dustbins	2	—	6	—	—	8
To provide a sufficient number of dustbins ...	9	—	11	—	—	20
To repair roofs	168	—	61	—	18	247
To hack off defective external plastering of walls and to re-render	64	—	132	—	—	196
To render walls	10	—	9	—	17	36
To repair walls	42	—	28	—	5	75
To repair or provide rain water guttering and piping	80	—	98	—	14	192
To repair defective chimney	12	—	36	—	6	54
To renew or repair and paint window frames and sashes	80	—	140	—	35	255
To make windows open for ventilation ...	9	—	22	—	—	31
To ventilate rooms	1	—	3	—	—	4
To fix air bricks in front and back walls...	1	—	2	—	—	3

	PUBLIC HEALTH ACTS.				Section 9 of the Housing Act, 1936.	Total.
	Warning and Verbal Notices Complied with.		Statutory Notices Served.			
	Owners.	Occupiers.	Owners.	Occupiers.		
To provide sashlines	63	—	85	—	—	148
To lay new board floors and provide ventilation under same	5	—	6	—	2	13
To repair flooring of rooms and staircases, baluster rails, etc.	95	—	146	—	21	262
To renew or repair and paint doors, door frames, door sills, etc.	39	—	48	—	10	97
To repair internal plastering of walls or ceilings	161	—	242	—	28	431
To cleanse & redecorate interior of house	30	—	14	—	—	44
To cleanse rooms, bedding, etc.	—	37	—	15	—	52
To repair washing coppers... ..	37	—	58	—	3	98
To repair firegrates	81	—	104	—	19	204
To provide new scullery sink with lead waste pipe	15	—	16	—	4	35
To renew, repair or lengthen waste pipes of sinks	28	—	39	—	1	68
To trap the sink waste pipes	5	—	5	—	—	10
To discontinue using rooms in basement as bedrooms	—	4	—	1	—	5
To improve manure pits	2	—	1	—	—	3
To provide a window to staircase	7	—	4	—	—	11
To remedy other defects	107	—	95	—	21	223
No. of sewer defects found and made good	—	—	—	—	—	24

REMOVAL OF HOUSE REFUSE

(See Annual Reports for 1934 and previous years).

ERADICATION OF BED BUGS.

The Council are not carrying out disinfection of houses and effects by hydrocyanic acid gas, owing to its dangerous properties. During the year 71 families were removed from Clearance Areas to Council houses. On the day of removal the bedding of these families was removed to the Sanatorium and subjected to steam disinfection and then delivered to the new home. Other effects were sprayed with Insecticide, and in cases of severe infestation the old house was fumigated by the "Cescone" process (Sulphur Gas). The tenants have assisted in this work by allowing old mattresses, pictures and articles of furniture to be destroyed, and many have carried out disinfection themselves.

Seven Council houses found seriously infested have been fumigated by "Cescone" process satisfactorily.

Council houses when vacated are examined by the Housing Manager's staff, and if found to be infested with vermin, the architraves, picture rails, skirting boards, etc., are removed and the premises thoroughly sprayed with insecticide, while seats of infestation are dealt with by petrol lamps.

The Department has also fumigated 249 rooms in 57 private houses, receiving £124/10/- in fees from the owners.

HOUSING.

NUMBER OF SEPARATE DWELLINGS COMPLETED BY THE CORPORATION DURING 1937 :—

East Moulsecoomb Estate 214

The following statement shews the number of houses which the Corporation have built since the war :—

	Number completed at end of 1937.
May Road (14) ; Elm Grove (14)	28
Natal Road (flats)	20
Moulsecoomb (including flats and shops)	530
Queen's Park	450
Loder Road and Balfour Road (flats)	56
Nesbitt Road	28
Hereford Street	40
North Moulsecoomb (including shops)	394
Freshfield Road	28
Whitehawk Valley (including shops)	1175
Crescent Cottages (flats)	20
Bevendean Estate	72
Rottingdean	32
Turner's Land	110
Lavender Street (3) ; Essex Street and Montague Street flats (6)	9
Milner flats	48
Manor Farm Estate (including shops)	420
East Moulsecoomb Estate	214
Patcham, built by Steyning East R.D.C. (acquired by Brighton)	40
	— 3714

The work planned but not completed included 172 houses and 40 flats on the East Moulsecoomb Estate, 18 houses in Carden Avenue, 48 maisonettes and 11 flats on Nelson Place site, and 6 houses in Ivory Place.

NUMBER OF HOUSES COMPLETED BY PRIVATE BUILDERS :—

			Separate dwellings.	Houses converted into	Flats.	Flats.	GAIN.
				HOUSES.			
1918-23	...	...	99	42	=	136	94
1924	...	...	126	13	=	33	20
1925	...	...	156	12	=	24	12
1926	...	...	257 (a)	3	=	9	6
1927	...	...	331	15	=	36	21
1928	...	...	225	9	=	23	14
1929	...	...	284	7	=	18	11
1930	...	...	290	8	=	29	21
1931	...	...	318	15	=	42	27
1932	...	...	630 (b)	18	=	52	34
1933	...	...	777 (c)	21	=	57	36
1934	...	...	794 (d)	20	=	68	48
1935	...	...	678 (e)	18	=	69	51
1936	...	...	477 (f)	15	=	46	31
1937	...	...	650 (g)	23	=	67	44
			6092*				470
			Total dwellings			—	6562
			GRAND TOTAL ...				10276

- (a) 14 of these were one-roomed flats.
 (b) 24 of these were flats contained in 7 buildings.
 (c) 67 of these were flats contained in 9 buildings.
 (d) 24 of these were flats contained in 2 buildings.
 (e) 90 of these were flats contained in 4 buildings and 13 were flats over 9 new shops.
 (f) 52 of these were flats contained in 8 buildings and 10 were flats over 6 shops.
 (g) 120 of these were flats contained in 11 buildings and 20 were flats over 20 shops.
 *Total new houses, 5,658.

HOUSING TABLES REQUIRED BY THE MINISTRY OF HEALTH.

1. INSPECTION OF DWELLING-HOUSES DURING THE YEAR.

- (1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ... 9984
- (2) Number of dwelling-houses which were inspected and recorded under the Housing Consolidated Regulations, 1925 7301
- (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... 393
- (4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation ... 1424

2. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.

- Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers 908

3. ACTION UNDER STATUTORY POWERS.

A.—*Proceedings under sections 9, 10, and 16 of the Housing Act, 1936.*

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	...	...	...	...	...	21
(2) Number of dwelling-houses which were rendered fit :—						
(a) by owners	...	...	...	...	...	20
(b) by Local Authority in default of owners	...	...	...	...	...	2

B.—*Proceedings under Public Health Acts.*

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...	291
(2) Number of dwelling-houses in which defects were remedied :—			
(a) by owners	...	...	434
(b) by Local Authority in default of owners	...	...	—

C.—*Proceedings under sections 11 and 13 of the Housing Act, 1936.*

(1) Number of dwelling-houses in respect of which Demolition Orders were made	...	...	...	...	...	3
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	...	...	...	...	...	4

D.—*Proceedings under section 12 of the Housing Act, 1936.*

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	...	...	...	29
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	...	...	...	1

4. HOUSING ACT, 1936.—PART IV.—OVERCROWDING :—

A.—(1) Number of dwellings overcrowded at the end of the year	...	...	...	275
(2) Number of families dwelling therein	...	...	...	413
(3) Number of persons dwelling therein	...	...	...	2209

B.—Number of new cases of overcrowding reported during the year	136
---	-----

C.—(1) Number of cases of overcrowding relieved during the year	524
(2) Number of persons concerned in such cases	... .. 3824

CLEARANCE OF UNHEALTHY DWELLINGS.

Richmond Hill, Carlton Street, etc., Area.	Everton Place Area.
Vine Street, No. 1 Area.	Warwick Street Area.
Vine Street, No. 2 Area.	South Street Area.

Inquiry by Inspector from Ministry of Health was held for the above areas on the 13th April, 1937. The six areas contained 110 dwellings and 479 persons will be displaced. All the Orders for the above have been confirmed by the Minister.

In September, 1937, there were represented a further 11 areas, containing 133 dwellings, occupied by 468 persons.

During the year, 39 families were rehoused on the East Moulsecoomb Estate, and 32 in other Council property. In addition, 21 families found their own alternative accommodation. 181 dwellings were demolished in Clearance Areas.

THE LOCAL ADMINISTRATION OF ACTS RELATING TO SHOPS, FACTORIES, WORKSHOPS, WORKPLACES, BAKEHOUSES, AND OUTWORKERS.

NUMBER AND CLASS OF PREMISES ON THE REGISTERS, 31ST DEC., 1937.

FACTORIES AND WORKSHOPS.

							Factories.	Work-shops.	Out-workers.
Railway Locomotive and Carriage Works ...	...	...	...	...	...	...	1	—	—
Motors, Cycles, and Coach Works ...	...	...	...	...	...	...	69	126	—
Smiths, Electrical and Metal Workers ...	...	...	...	...	...	...	51	89	—
Laundries, Dyers and Cleaners ...	...	...	...	...	...	...	33	39	—
Tailors ...	...	...	...	...	...	...	2	72	127
Ladies' and Children's Wearing Apparel ...	...	...	...	...	...	...	8	211	48
Boots, Leather Goods, and Boot Repairs ...	...	...	...	...	...	...	82	106	11
Bakehouses ...	...	...	...	...	...	...	63	35	—
Preparation of Food and Drink ...	...	...	...	...	...	...	145	31	—
Building Trades ...	...	...	...	...	...	...	31	202	—
Furnishing Trades ...	...	...	...	...	...	...	28	146	10
Firewood and Saw Mills ...	...	...	...	...	...	...	20	3	—
Printers, Bookbinders, and Bagmakers ...	...	...	...	...	...	...	51	6	2
Photographers ...	...	...	...	...	...	...	2	38	—
Jewellers, Watchmakers, Opticians, and Electro-Platers ...	...	...	...	...	...	...	12	58	—
Florists, Natural and Artificial ...	...	...	...	...	...	...	—	18	—
Hairworkers and Wigmaking ...	...	...	...	...	...	...	—	9	—
Miscellaneous ...	...	...	...	...	...	...	35	84	4
Totals ...	...	...	...	...	...	...	633	1273	202

WORKPLACES.

Offices ...	...	...	...	...	...	...	600
Public Garages ...	...	...	...	...	...	...	151
Restaurant Kitchens ...	...	...	...	...	...	...	193
Places of Entertainment ...	...	...	...	...	...	...	30
Miscellaneous ...	...	...	...	...	...	...	97
Total ...	...	...	...	...	...	...	1071

OCCUPIED SHOPS.

Sale of :—

WEARING APPAREL, including Drapers, Milliners, Furriers, Costumiers, Tailors, Hosiers, Boots and Second-hand Clothes Dealers	938
PROVISIONS ,, Grocers, Bakers, Butchers, Greengrocers, Fishmongers, Poulterers, Dairies, etc. ...	1404
REFRESHMENTS ,, Restaurants, Licensed Houses and Tea-rooms and Off-Licences	782
FURNITURE ,, Furniture and Antiques, Ironmongers, China, Glass and Hardware, Pictures, Frames, and Musical Instruments, Electricians and Wireless	426
OTHER ARTICLES ,, Hairdressers, Jewellers, Photographers, Chemists, Coal Merchants, Cycle and Motor Accessories, Builders' Merchants	972
DEPARTMENTAL STORES	20
MIXED SHOPS, including Confectioners, Tobacconists, Newsagents, Stationers, Bazaars, and Miscellaneous ...	918
WAREHOUSES and other business premises	146
	<u>5606</u>
UNOCCUPIED SHOPS	152

Total premises under the Factory and Workshops Acts ...	2108
„ „ under Shops Acts, etc.	5758
„ „ under Public Health Act, 1936	1071
Total premises	<u>8937</u>

VISITS AND INSPECTIONS.

Factories	98
Workshops	236
Workplaces	203
Shops	8019
(Bakehouses included above—160) ...	<u>8556</u>

Notices have been served in respect of non-compliance with the various Acts as follows :—

FACTORY AND WORKSHOP ACT.

Notices <i>re</i> sending in lists of Outworkers	181
---	-----

PUBLIC HEALTH ACTS.

Sanitary defects in Factories and Workshops.

Workrooms overcrowded, badly ventilated, or in a dirty condition	41
Drains and sanitary conveniences unsuitable, defective or foul	18
Premises without sufficient or separate conveniences for the use of each sex	1
Bakehouses not complying with special regulations	58
Other nuisances	7

Sanitary defects in Shops and Warehouses.

Drains and sanitary conveniences unsuitable, defective or foul	93
Premises dirty or with foul accumulations	102
Premises damp, roofs leaky, or waste pipes defective	11
Premises without proper receptacles for trade refuse	72
Other nuisances	54
Notices served under section 72 P.H. Act, 1925, relating to precautions against contamination of food	27

SHOPS ACT, 1934.

To provide suitable and sufficient means of ventilation	50
To provide means of maintaining a reasonable temperature	43
To provide suitable and sufficient sanitary conveniences	9
To provide suitable and sufficient means of lighting	7
To provide suitable and sufficient washing facilities	12
To provide suitable and sufficient facilities for the taking of meals	56
To provide seats for female shop assistants	14

MEAT REGULATIONS.

Warning letters <i>re</i> non-compliance with Articles 19, 20, and 21 relating to stalls, shops, and transport	39
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MERCHANDISE MARKS ACT, 1926, AND THE AGRICULTURAL PRODUCE (GRADING AND MARKING) ACT, 1928.

Failing to mark imported foods :—

Written cautions and circulars	81
Verbal cautions	536

Printed Notices and warning letters regarding breaches of the Shops Acts.

Failing to exhibit the prescribed notice <i>re</i> Assistants' Half-Holiday	76
Failing to keep a record of hours of employment of Young Persons	127
Failing to exhibit the prescribed forms under the Shops Act, 1934	188
Failing to exhibit the prescribed forms under the Shops (Sunday Trading Restriction) Act, 1936... ..	283
Failing to comply with the Half-Holiday Closing Regulations	93

Total Notices under all Acts	2279
-------------------------------------	------

No certificates of exemption in respect of sanitary conveniences were granted under Section 10 (6) Shops Act, 1934.

Orders served on Occupiers of Shops :—

Half-holiday and Early Closing Orders	...	...	...	219
Summer Extension Orders	...	...	...	470
Christmas Suspension Orders	...	...	...	24
Notification of new workshops sent in by H.M. Inspector	...	...	...	25
(Of these 17 were already on the register.)				
Notification of workshops and factories to H.M. Inspector	...	...	...	1
wherein Abstracts were not shewn	...	...	...

RAG FLOCK ACTS, 1911-1928.

23 Visits were made to premises in which Rag Flock is used.

PHARMACY AND POISONS ACT, 1933.

221 Visits have been made to shops and 172 occupiers have been entered in the register as listed sellers of poisons.

OUTWORKERS.

Lists sent in by employers	...	...	...	...	114
„ „ from other districts	...	...	...	...	15
Number of names on lists	...	...	...	...	408
„ „ registered outworkers	...	...	...	...	210
Inspection of outworkers' rooms	...	...	...	...	42
Number of outworkers' names sent to other authorities	...	...	...	...	19

COMPLAINTS.

Public Health and Shops Acts	...	...	...	...	521
Complaints from H.M. Inspector of Factories	...	...	...	...	9

During the year, 392 new businesses have opened, 32 of which were entirely new shops, whilst 27 shops have been demolished in connection with street improvement.

THEATRES AND CINEMAS.

The ventilation of all places of public entertainment has received continued attention.

PROSECUTIONS.

SHOPS ACT, 1912.

Failing to close shops on Weekly Half-holiday : one person was summoned with the following result : dismissed under Probation of Offenders' Act.

SHOPS (HOURS OF CLOSING) ACT, 1928.

Failing to close shops at times stated in Sections 1 and 2 : six persons were summoned with the following results : one fine of £1 ; two of 10s. ; and three dismissed under Probation of Offenders' Act.

PETITIONS UNDER SHOPS ACTS.

SHOPS ACT, 1912.—Two Exemption Orders were made under Section 4 of the Act exempting the following businesses from closing at 1 p.m. on one weekday in each week : (a) the sale of toilet goods, cosmetics, and perfumery ; (b) the business of lending books.

SHOPS (HOURS OF CLOSING) ACT, 1928.—Orders were made in accordance with petitions presented permitting extension during the four summer months of the general closing hours in a defined central area for Booksellers, Stationers, Newsagents, Toys and Fancy Goods Dealers, Fruiterers, Florists, Greengrocers, also for the shops on the two Piers.

Two Orders were made under Section 5 of the Act in respect of Exhibitions held in the Dome and Corn Exchange.

SHOPS (SUNDAY TRADING RESTRICTION) ACT, 1936.—Orders were made under Section 5 of this Act allowing the following classes of shops to remain open on not more than eighteen Sundays during the year.

- The sale of
- (a) Articles required for the purpose of fishing.
 - (b) Photographic requisites.
 - (c) Toys, souvenirs, and fancy goods.
 - (d) Books, stationery, photographs, reproductions, and postcards.
 - (e) Fried fish and chips.

TABLE REQUIRED BY HOME OFFICE.

1.—*Inspection of Factories, Workshops and Workplaces.*

Premises.	Number of	
	Inspections.	Written Notices.
Factories (including Factory Laundries)	98	} Including Notices <i>re</i> Out- workers' Lists.
Workshops (including Workshop Laundries)	236	
Workplaces (other than Outworkers' premises)	203	
Total	537	109

2.—*Defects found in Factories, Workshops and Workplaces.*

Particulars.	Number of Defects			Number of Prosecutions.	
	Found.	Remedied.	Referred to H.M. Inspector.		
<i>Nuisances under the Public Health Acts:—*</i>					
Want of cleanliness	41	41	—	}	
Want of ventilation	—	—	—		
Overcrowding	—	—	—		
Want of drainage of floors	—	—	—		
Other nuisances	9	9	—		
Sanitary accommodation {	insufficient ...	1	—		
	unsuitable or defective ...	18	—		
	not separate for sexes	1	—		
<i>Offences under the Factory and Workshop Acts:</i>					
Illegal occupation of underground bakehouse (s. 101)	—	—	—		
Other offences	—	—	—		
(excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921).					
Total	70	70	—	—	

*Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

FOOD.

MILK SUPPLY.

Table shewing number of persons and premises registered for the sale of milk :—

	On Register 1st January, 1937.	New registra- tions during 1937.	Removed from Register during 1937.	Total. 31st Decem- ber, 1937.
No. of dairymen	100	4	10	94
No. of dairies	138	1	14	125*
No. of cow-keepers (not selling milk by retail) ...	8	—	1	7
Persons registered for sale of milk in sealed bottles only	202	43	27	218

*This figure includes 14 cowsheds.

There are approximately 450 milch cows in the Borough, of these 40 are in herds producing Tuberculin Tested Milk, and 200 in herds producing Accredited Milk.

It is now estimated that some 70% of the milk supply of Brighton is pasteurised before sale.

ACTION TAKEN AS TO TUBERCULOUS MILK AND TUBERCULOUS CATTLE.

During the year 43 samples of milk (primary) were examined for the presence of tubercle bacilli and in 4 samples (9·3 per cent.) tubercle bacilli were found.

After veterinary examination of the four herds concerned, 31 further samples of milk (secondary) were taken and submitted for biological examination. As a result, seven cows were dealt with under the Tuberculosis Order of 1925. The following is a summary of the farms concerned :—

At one farm 3 diseased cows were found.

At one farm 2 diseased cows were found.

At two farms 1 diseased cow was found on each farm.

Of the above seven cows slaughtered two were on a farm in Brighton, and are included under the report of action taken under the Tuberculosis Order of 1925 (see page 47).

NOTIFICATION TO COUNTY COUNCILS OF TUBERCLE FOUND IN CALVES SLAUGHTERED IN BRIGHTON.

(a) Generalised disease.

Letters were sent to the County Authorities regarding 22 calves slaughtered at the Brighton Abattoir and found on post-mortem examination to be affected with generalised tubercle.

The results of investigations conducted by the Authorities are set out below.

No. of cases
investigated.

- 4 At each farm one cow was found to be affected with tubercle and slaughtered under the Tuberculosis Order of 1925.
- 6 Cow was slaughtered before investigations started ; no post-mortem results available.
- 11 11 milk samples were taken with negative results, and no diseased animal found.
- 1 Calf could not be traced.

(b) Tubercle : the disease not being generalised.

Letters were sent in respect of 17 calves.

No. of cases
investigated.

- 2 At each farm one cow was found to be affected with tubercle, and slaughtered under the Tuberculosis Order of 1925.
- 1 Cow had been slaughtered before investigation started ; no post-mortem result available.
- 14 No diseased animal found.

TUBERCULOUS PIGS.

Letters were sent regarding two consignments of pigs that were tuberculous, and the animals appeared to be "dairy fed." No diseased cow was found in either investigation.

NUMBER OF LICENCES GRANTED UNDER THE MILK (SPECIAL DESIGNATIONS) ORDER, 1936.

Under the above Order, the undermentioned licences were issued during the year :—

			<i>To Produce.</i>	<i>To Sell.</i>
Tuberculin tested milk	...		2	37
Accredited milk	...	...	5	7
Pasteurised milk	...	...	4	19

BACTERIOLOGICAL EXAMINATION OF FOOD.

"*Tuberculin Tested*" Milk. Six samples.

Complied with prescribed conditions	...	...	5
Failed to comply	...	...	1

A letter was sent to producer and dairyman. Dairyman changed his supply.

"*Accredited*" Milk. Fourteen samples.

Complied with prescribed conditions	...	...	11
Failed to comply	...	...	3

Letters sent to producers concerned.

"*Pasteurised*" Milk. Twenty-six samples.

Complied with prescribed conditions	...	...	21
Failed to comply	...	...	5

The pasteurised milk samples were, in addition, submitted to the phosphatase test, and it was found that in twelve samples the milk had been heated, but not properly pasteurised ; these samples included all the five that failed to comply with the prescribed conditions.

Of the 21 samples that complied with the prescribed conditions, five would have failed if the standard examination included the examination for B/Coli.

Letters were sent to all producers where the milk failed to reach the prescribed standard, and one producer installed new pasteurising plant.

Ice Cream. Twelve samples.

Satisfactory	...	...	...	...	...	...	4
Failed by reason of high bacterial count and the presence of B/Coli	...	...	...	...	...	...	4
Failed by reason of high bacterial count. (B/Coli absent)	...	...	...	...	...	...	1
Failed on B/Coli test only	...	...	...	...	...	...	3

Mineral Waters. Six samples.

Satisfactory	...	...	...	...	...	...	4
B/Coli present	...	...	...	...	...	...	1
Visible dirt in sample	...	...	...	...	...	...	1

A letter was sent to the Medical Officer of Health of the local authority of the district where the mineral water with visible dirt in the sample was produced.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Samples examined.

A.—From all sources.

Total samples, 160. Formal, 151. Informal, 9.

B.—Wholesale samples in course of delivery, 53.

Average milk fat over samples examined	...	...	...	3.41%
No. of samples below standard	...	...	...	14, or 26.4%
Samples deficient in fat, 3 ; in solids not fat, 6 ; in fat and in solids not fat, 5.				

C.—Retail Samples from Shops and Roundsmen, 93.

Average milk fat over samples examined	...	...	...	3.58%
No. of samples below standard	...	...	...	15, or 16.1%
Samples deficient in fat, 6 ; in solids not fat, 7 ; in fat and in solids not fat, 2.				

D.—Samples taken at Institutions and Schools, 14.

Average milk fat over samples examined	...	...	...	3.61%
No. of samples below standard (deficient in fat)	...	...	...	1, or 7.1%

All samples were examined for preservative, but in no case was preservative found.

From the results of these analyses it is evident that, taking the average, the milk supply of Brighton is of good quality.

The large percentage of "adulterated" samples in those taken from wholesale sources is due to the fact that the majority of these samples are taken following low quality retail samples.

For selling 3 samples of milk deficient respectively in fat 2% and in solids not fat 1.6% ; in solids not fat 2.94% ; in fat 6.6% and in solids not fat 4.7%, 3 summonses were issued against a producer. The case was dismissed.

For selling milk deficient in solids not fat 21.1% a retailer was fined 15/- and 5/- analyst's fee.

For selling a sample of milk in course of delivery to a dairy, deficient in fat 23.3% and in solids not fat 22.4%, a summons was issued against a firm of wholesale dairymen. The principals were fined £5 and £3 respectively.

For selling a sample of milk deficient in solids not fat 5.4% a retailer was summoned. The case was dismissed on payment of £2/2/- costs.

DRUGS.

Seven samples were purchased :—

Cough Sweets	...	...	2	Cough Syrups	...	...	5
All were satisfactory.							

MISCELLANEOUS SAMPLES.

Ninety-three miscellaneous samples were purchased :—

Butter	...	...	...	17	Porridge Oats	...	...	5
Butter substitute	...	...	...	1	Tinned fish	...	...	9
Margarine	...	...	...	5	Soups in packets	...	...	10
Lard	...	...	...	11	Kippers	...	...	1
Cheese	...	...	...	5	Apples	...	...	7
Real Cream Cakes	...	...	...	4	Icing Sugar	...	...	1
Coffee	...	...	...	10	Chocolates	...	...	1
Cocoa	...	...	...	5	Wine	...	...	1

Of the above, the following samples were reported against by the Public Analyst.

Icing Sugar.—Found to consist of sodium phosphate and starch. This sample had been purchased by a private individual and the remnant of the sample taken to the Health Department.

Attempts were made to purchase formal samples, but the sale of icing sugar at the shop had ceased as the purchaser had made a disturbance at the shop.

Two samples of butter contained excess of moisture 1.46% and 0.17%. Warning letters were sent to the vendors.

Two samples of soup in packets were found to have been attacked by beetles. The shops were visited, the stock examined, and similar packets were surrendered for destruction.

PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) REGULATIONS.

Fifty-seven samples of food, as under, were examined mainly for the presence of prohibited preservatives and colouring matter :—

Dairy Cream	10	Meat Pies	4
Tinned Cream	9	Dried Fruits	8
Sausages and Sausage Meat... ..	20	Mineral Waters	5
Sausage seasoning	1		

No sample contained preservatives in contravention of the Regulations.

PUBLIC HEALTH (CONDENSED MILK) REGULATIONS.

No instance was noted of infringement of the Regulations.

MERCHANDISE MARKS ACTS.

Three samples of new laid eggs were examined for indication of removal of marks of origin. No indication of removal of marks was found.

FOOD SURRENDERED FROM MARKETS AND SHOPS.

Beef, imported	7108 lbs.	Carrots	$\frac{1}{2}$ cwt.
Beef, English	8 "	Onions	90 $\frac{1}{2}$ bags
Mutton and Lamb, im- ported	483 "	Peas	2 tins
Pork	46 "	Potatoes	10 cwt.
Bacon	13 "	Apples	5 boxes
Fat and suet	428 "	Oranges	1700
Ox livers	65 "	Pears	13 boxes
Other ox organs	58 "	Rhubarb	1 box
Sheep and lambs' livers	78 "	Cheese	4 lbs.
Calves' livers	20 "	Packet soups	1 dozen
Pigs' kidneys	4 "	Herring roes	1 tin
Tripe	20 "	Jellied eels	6 bowls
Tinned meats	417 "	Wet fish	11 tons 16 $\frac{1}{2}$ cwt.
Sausages	100 "	Dried fish	2 tons 4 $\frac{1}{2}$ cwt.
Poultry	13 carcasses	Lobsters, prawns, and shrimps	1 ton 5 cwt.
Rabbits	184 "	Shellfish	7 $\frac{1}{4}$ cwt.
Eggs	269 dozen		

UNSOUND FOOD SEIZED AND CONDEMNED.

For exposing for sale bacon which was unsound and unfit for human food a vendor was fined 40/-.

DISEASE IN MEAT.

ANIMALS SLAUGHTERED AT PUBLIC ABATTOIR.

Description.							Number of Carcases or Organs Surrendered for Destruction.
*Beasts (whole carcase, including internal organs) ...							138
,, Fore-quarters							10
,, Heads							88
,, Tongues							118
,, Lungs							452
,, Hearts							45
,, Livers							782
,, Other organs							181
Calves (whole carcase, including internal organs) ...							35
,, Heads							—
,, Tongues							—
,, Lungs							32
,, Hearts							29
,, Livers							41
,, Other organs							24
Sheep (whole carcase, including internal organs) ...							3
,, Fore-quarters							1
,, Heads							—
,, Tongues							—
,, Lungs							25
,, Hearts							10
,, Livers							481
,, Other organs							24
Pigs (whole carcase, including internal organs)							62
,, Fore-quarters							1
,, Heads							590
,, Tongues							401
,, Lungs							1572
,, Hearts							1019
,, Livers							1442
,, Other Organs							1679

*In addition, seven cows were slaughtered under the Tuberculosis Order of 1925, the carcases being totally condemned.

The foregoing table shows unsound meat condemned for all reasons, including tuberculosis. The number of animals slaughtered at the Brighton Abattoir, and found to have been affected with tuberculosis, is separately shown in the following table :—

Animals killed at Brighton Abattoir. 1				Total number of Animals affected with Tuberculosis. 2	Percentage. 3	Whole Carcase Condemned 4	Percentage. 5
Beasts 3787				741	19·6	138	3·6
Calves 9681				70	0·7	33	0·3
Sheep 15405				—	—	—	—
Pigs 18059				917	5·1	55	0·3

The numbers and percentages in columns 2 and 3 are inclusive of those in columns 4 and 5.

AVERAGE NUMBER OF ANIMALS SLAUGHTERED PER WORKING DAY DURING 1937 AT THE BRIGHTON ABATTOIR.

	<i>Mon.</i>	<i>Tues.</i>	<i>Wed.</i>	<i>Thurs.</i>	<i>Fri.</i>	<i>Sat.</i>
No. of Working days	51	52	51	52	52	51
Beasts ...	18	22	11	10	9	4
Calves ...	81	41	56	10	4	—
Sheep ...	93	79	46	35	16	29
Pigs ...	105	66	77	65	21	16

The Abattoir was open for slaughtering each day except Sundays (other than Sunday before Christmas), Good Friday, Coronation Day, and Christmas Day. It is interesting to note that in 1937 the last of the forty private slaughterhouses in existence when the Abattoir was opened in 1894 ceased to exist as a slaughterhouse.

DISEASES OF ANIMALS ACTS.

TUBERCULOSIS ORDER, 1925.

Under the above Order, six premises were reported to the Veterinary Officer. As a consequence of visits and inspections of the herds, six cows were destroyed.

				<i>No. of animals</i>	
				<i>Inspected.</i>	<i>Found diseased.</i>
Cows in milk	...	...	...	41	7
Dry cows	...	...	...	15	2
Other bovines	...	...	...	5	—
Total	...	...	...	61	9

Upon post-mortem examination, two cows were found to be affected with advanced tuberculosis within the meaning of the Order, six were found to be affected with tuberculosis, not being advanced tuberculosis. One was found not to be affected with tuberculosis. The total compensation due to the owners was £49.

Net Salvage, after deduction of expenses incurred in and for the purpose of slaughter, amounted to £11/17/5.

SWINE FEVER ORDER, 1908.

Three suspected outbreaks of swine fever were reported to the Ministry of Agriculture and Fisheries. After investigation by their Veterinary Officers one case was confirmed.

In addition to the above, a consignment of pigs received at the Abattoir for slaughter shewed on post-mortem examination suspected Swine Fever. The local authority of the district from which the pigs were received was notified, and the disease was subsequently confirmed as Swine Fever.

SWINE FEVER (REGULATION OF MOVEMENT) ORDER, 1922.

All swine arriving on premises in Brighton are visited during the prescribed period by Police Officers. Where a pig has died, the death has been reported and a post-mortem examination made.

SLAUGHTER OF ANIMALS ACT, 1933.

Fifty-three slaughtermen were holding licenses on 31st December, 1937.

TABLE I.

YEAR.	Population.	REGISTERED BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO THE DISTRICT.			
		Un-corrected Number.	Nett.		Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 year of Age.		At all ages.	
			Number.	Rate.					Number.	Rate per 1,000 Nett Births.	Number.	Crude Rate.
1937 ...	146,700	2255	1940	13·22	2212	15·08	345	156	99	51	2023	13·79

Total Live Births notified numbered 2,299 ; (1) by doctors, 263 ; (2) by midwives, 1,984 ; (3) by parents, 25 ; by (1 and 2) 25 ; by (2 and 3) 2.

In addition to above, 76 still-births were notified, 6 by doctors, 69 by midwives, and 1 by parent.

25 notifications were received only after warning letters to the parents.

TABLE II.

Name of Ward.	Total Number of Births.	Number of deaths during 1937, from							
		All causes.	Under one Year of age.	Diphtheria.	Whooping Cough.	Pulmonary Tuberculosis.	Other Tuberculous Diseases	Bronchitis and Pneumonia.	Diarrhoea and Enteritis.
King's Cliff ...	129 (5)	127	2	—	—	10	—	9	1
Queen's Park ...	93 (5)	110	4	—	—	13	—	10	—
Pier ...	89 (1)	138	5	—	—	8	—	9	—
Pavilion ...	21 (1)	34	1	—	—	1	—	1	1
Regency ...	46 (—)	74	3	—	—	1	—	6	—
West ...	34 (1)	74	1	—	—	3	1	7	1
Montpelier ...	75 (1)	95	6	—	—	4	—	8	—
St. Nicholas' ...	71 (—)	99	7	—	2	8	1	6	2
St. John's ...	116 (—)	121	8	—	2	3	2	8	1
Hanover ...	115 (—)	138	6	—	—	10	—	6	1
St. Peter's ...	47 (—)	81	6	—	1	—	1	10	2
Elm Grove ...	146 (1)	114	8	1	—	6	1	8	3
Lewes Road ...	82 (2)	88	9	—	—	3	1	8	1
Moulsecoomb ...	125 (1)	86	4	—	2	3	—	5	1
Preston Park ...	87 (4)	142	2	1	—	3	2	13	2
Hollingbury ...	137 (11)	122	6	—	1	9	2	8	2
Preston ...	83 (5)	162	6	—	—	7	1	8	—
Patcham ...	110 (11)	85	4	—	—	3	2	6	1
Rottingdean ...	240 (3)	118	11	—	—	4	3	12	4
Address not known	—	*15	—	—	—	—	—	—	—
Mothers confined in but not belonging to Brighton in Private Houses, 21; Nursing Homes, 34; Maternity Hospital, 317; New Sussex Hospital, 2; Municipal Hospital, 12; Albion Hill Home, 23.	409	—	—	—	—	—	—	—	—
Totals ...	2255 (52)	2023	99	2	8	99	17	148	23

The figures in brackets represent Brighton children born in Nursing Homes. 230 Brighton children were born in the Sussex Maternity and Women's Hospital, 1 in the New Sussex Hospital, and 526 in the Municipal Hospital; the births have been allocated to the Ward in which the mother lived.

The total births in the Municipal Hospital was 538 (legitimate 453; illegitimate 85).

*Of these, 5 died in the Elm Grove Home, 7 in the Brighton Borough Mental Hospital, and 3 were found dead.

TABLE III.—(continued).

CAUSE OF DEATH.	Under 1 Week.		1-2 Weeks.		2-3 Weeks.		3-4 Weeks.		Total under 4 Weeks.		1-2 Months.		2-3 Months.		3-4 Months.		4-5 Months.		5-6 Months.		6-7 Months.		7-8 Months.		8-9 Months.		9-10 Months.		10-11 Months.		11-12 Months.		Total Deaths under one Year.
	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.	M.	F.M.			
Premature birth	15	6	1	—	1	—	2	—	19	6	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	27	
Injury at birth	4	2	1	—	—	—	—	—	5	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7	
Atelectasis	3	1	—	—	—	—	—	—	3	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	
Pemphigus neonatorum	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
Accidental Burns	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	2	
Accidental mechanical suffocation	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
Totals	26	12	2	2	3	3	5	—	36	17	4	6	5	—	4	2	1	—	2	1	4	1	1	1	2	3	1	—	2	1	3	2	99

TABLE IV.—(continued).

[illegible]

TABLE IV.—(continued).

CAUSE OF DEATH	Total Deaths at all Ages.	AGES AT DEATH.																
		Total.	0-1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65-75	75-85	85 +
		M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
IV.—DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS—																		
Hæmorrhagic conditions ...	1	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—
Anæmia ...	5	—	—	—	—	—	—	—	—	—	1	1	2	—	1	—	—	
Leukaemia ...	3	3	—	—	—	—	1	—	—	—	—	1	—	—	—	1	—	
V. CHRONIC POISONING—																		
Alcoholism ...	2	1	1	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—
VI.—DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS—																		
Meningitis... ..	6	5	1	1	—	—	1	—	—	—	—	1	1	1	—	—	—	—
Tabes dorsalis ...	3	3	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—
Other diseases of the spinal cord ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—
Cerebral hæmorrhage ...	55	22	33	—	—	—	—	—	—	—	—	—	2	1	6	7	4	8
Cerebral embolism and thrombosis	91	40	51	—	—	—	—	—	—	—	—	—	1	—	9	5	15	20
Paralysis of unstated origin ...	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
General paralysis of the insane...	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—
Epilepsy ...	9	7	2	—	—	—	—	—	—	—	1	1	2	2	1	1	—	—
Other diseases of the nervous system ...	15	5	10	—	—	—	—	—	—	—	1	—	—	1	2	1	2	4
Otitis ...	2	1	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—
VII.—DISEASES OF THE CIRCULATORY SYSTEM—																		
Acute endocarditis ...	3	2	1	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—

TABLE IV.—(continued.)

CAUSE OF DEATH.	AGES AT DEATH.																					
	Total Deaths at all Ages.																					
	Total.	M. F.	0-1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65-75	75-85	85 +				
	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.				
Diseases of the circulatory system— (<i>contd.</i>)																						
Aortic valve disease ...	15	10	5	—	—	—	—	—	—	—	—	—	1	—	1	2	1	6	1	2	—	—
Mitral valve disease ...	19	6	13	—	—	—	—	—	—	—	—	—	—	—	1	4	2	2	4	—	5	—
Endocarditis not returned as acute or chronic ...	3	—	3	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	—	—	1	—
Other or unspecified valve disease ...	23	6	17	—	—	—	—	1	—	—	—	—	—	2	3	2	2	2	4	1	4	—
Diseases of the myocardium ...	394	176	218	—	—	—	—	1	—	—	1	—	2	1	8	7	21	20	56	68	71	95
Diseases of the coronary arteries, Angina pectoris ...	33	24	9	—	—	—	—	—	—	—	—	—	2	—	2	6	2	9	4	4	3	1
Other diseases of the heart ...	18	7	11	—	—	—	—	—	—	—	—	2	—	—	—	1	—	3	6	3	2	—
Aneurysm ...	5	4	1	—	—	—	—	—	—	—	—	—	—	—	—	3	1	1	—	—	—	—
Arterio-sclerosis ...	193	84	109	—	—	—	—	—	—	—	—	—	—	1	21	13	11	38	27	30	45	2
Gangrene ...	3	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—
Other diseases of the Arteries ...	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—
Diseases of the veins ...	3	1	2	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
Abnormalities of blood pressure	18	6	12	—	—	—	—	—	—	—	—	—	—	—	—	2	1	3	6	1	2	—
VIII.—DISEASES OF THE RESPIRATORY SYSTEM—																						
Bronchitis ...	53	26	27	4	—	—	—	—	—	—	—	—	—	2	—	5	2	5	6	6	11	4
Broncho-pneumonia ...	60	34	26	8	4	1	—	—	—	—	1	—	3	—	4	3	5	5	3	5	2	5
Lobar pneumonia ...	18	10	8	—	—	—	—	1	—	—	—	—	3	1	2	4	4	1	1	—	1	—
Pneumonia (not otherwise defined)	17	9	8	1	—	—	—	—	—	—	—	—	1	2	1	3	3	2	—	1	1	—
Pleurisy ...	1	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Congestion and hæmorrhagic infarct of lung, etc. ...	3	—	3	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Asthma ...	11	7	4	—	—	—	—	—	—	—	1	—	—	2	1	2	2	2	1	—	1	—
Other diseases of the respiratory system ...	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

TABLE IV.—(continued).

CAUSE OF DEATH.	Total Deaths at all Ages.	AGES AT DEATH.																
		TOTAL.	0-1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65-75	75-85	85 +
		M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
Non-venereal diseases of the genito- urinary system and annexa— (<i>contd.</i>)																		
Diseases of the bladder	6	2	4											1	1	1	2	—
Diseases of the urethra, urinary abscess, etc.	4	4	—										1	2	1	—	—	—
Diseases of the prostate... ..	27	27	—									1	—	2	11	—	—	2
Diseases of the male genital organs	1	1	—											1	—	—	—	—
Diseases of the female genital organs	3	—	3						1					—	2	—	—	—
XI.—DISEASES OF PREGNANCY, CHILDBIRTH AND THE PUERPERAL STATE—																		
Ectopic gestation	1	—	1								1			—	—	—	—	—
Toxæmia of pregnancy	1	—	1								1			—	—	—	—	—
XII.—DISEASES OF THE SKIN AND CELLULAR TISSUE—																		
Cellulitis	1	1	—											1	—	—	—	—
XIII.—DISEASES OF THE BONES AND ORGANS OF LOCOMOTION—																		
Acute infective osteo-myelitis ...	2	—	1						1					—	—	—	—	—
Other diseases of the bones ...	1	1	—										1	—	—	—	—	—
Diseases of the joints and other organs of locomotion	1	1	—									1	—	—	—	—	—	—

TABLE IV.—(continued).

CAUSE OF DEATH.	Total Deaths at all Ages.	AGES AT DEATH.																			
		Total.	0-1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65-75	75-85	85 +			
		M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	F. M.	F. M.	F. M.	F. M.
XIV.—CONGENITAL MALFORMATIONS—																					
Congenital hydrocephalus ...	1	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Spina bifida and meningocele ...	6	2	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital malformation of heart	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Monstrosities ...	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other congenital malformations	2	1	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
XV.—DISEASES OF EARLY INFANCY—																					
Congenital debility ...	3	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Premature birth ...	27	19	8	19	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Injury at birth ...	7	5	2	5	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Atelectasis ...	4	3	1	3	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pemphigus neonatorum ...	1	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
XVI.—OLD AGE—																					
Senile decay ...	73	26	47	—	—	—	—	—	—	—	—	—	—	—	—	1	—	12	26	13	21
XVII.—DEATHS FROM VIOLENCE—																					
Suicide by solid or liquid poisons and corrosive substances ...	6	1	5	—	—	—	—	—	—	—	—	—	1	—	—	1	1	2	—	1	—
Suicide by poisonous gas ...	17	14	3	—	—	—	—	—	—	—	2	—	3	1	5	1	4	—	—	1	—
Suicide by hanging or strangulation ...	4	4	—	—	—	—	—	—	—	—	—	—	—	2	—	2	—	—	—	—	—
Suicide by drowning ...	1	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—
Suicide by cutting or piercing instruments ...	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—
Suicide by jumping from high place ...	2	1	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—

APPENDIX I.

Scheme made by the Council of the Borough of Brighton under Section 1 of the Midwives Act, 1936, for securing the provision of domiciliary service of midwives by the Council.

1. The Scheme shall provide :—

- | | |
|---|-----|
| (a) An Agreement with the Sussex Maternity and Women's Hospital for an extern service of seven midwives under a qualified Superintendent who, with their pupils, will attend midwifery cases up to an annual maximum of | 700 |
| (b) An Agreement with the Brighton, Hove and Preston District Nursing Association to provide twelve midwives under the supervision of a Sister Midwife to attend maternity nursing cases up to an annual maximum of ... | 80 |
| (c) Agreements with the three outlying nursing associations, viz., The Rottingdean and District, the Moulsecoomb and District, and the Patcham and District, to provide five midwives to attend midwifery or maternity nursing cases estimated annually to number | 110 |
| (d) The establishment of posts on the whole-time staff of the Council for four municipal midwives at salaries on the same scale as that paid to Health Visitors, <i>i.e.</i> , Grade E. of the Council's grading scheme (£200 rising by annual increments of £12 10s. 0d. to £250), together with an allowance for uniform, telephone, reasonable travelling and laundry expenses. The Health Department will provide disinfectants, drugs, and dressings. These midwives will undertake attendances on midwifery or maternity nursing cases up to an annual maximum of 60 midwifery and 20 maternity nursing cases each, a total of | 320 |
| (e) The fees in cases attended by the municipal midwives to be £2 2s. 0d. for each primipara and £1 15s. 0d. for each multipara, whether the attendance is as a midwife or maternity nurse, these being the fees normally charged by midwives practising in the area. | |
| (f) The compulsory surrender of the certificates of two midwives who are incapable by reason of age or infirmity of body of efficiently performing their duties as midwives. | |
| (g) The provision of a pension on the basis of 10/60ths for a midwife who is 55 or over when appointed. | |

2. The Scheme made by the Council on the 30th July, 1936, under Section 101 of the Local Government Act, 1929, for securing the payment by the Council of annual contributions towards the expenses of voluntary associations providing maternity and child welfare services in or for the benefit of the County Borough, shall continue in force subject to the modification that in the case of the Brighton, Hove and Preston District Nursing Association the annual contributions thereto paid annually by the Council shall be increased by £80.

3. This Scheme shall come into operation on the 30th day of July, 1937.

APPENDIX II.

RECORD OF CLEARANCE OF UNHEALTHY DWELLINGS IN BRIGHTON TO 31st DECEMBER, 1937.

(I.) AREAS.

The details of Orders up to and including 1931 (Nos. 1 to 11) are set out fully in Appendix I. of my Annual Report for 1934, and the history up to 31st December, 1937, is as follows:—

HOUSING ACT, 1930.

(12) *Nelson Row and Nelson Place Area Compulsory Purchase Order, 1933.*

Part I.—Lands within the clearance area comprised—1 to 8, 9 to 11, 14, 15, 17 to 35, Nelson Place ; 1 to 6, 10, 11, 14 to 16, 18 to 22, 25 to 28, Nelson Row ; 17 to 21, Carlton Hill.

58 dwellings and 1 other building demolished.

285 persons (218 adults and 67 children) displaced.

Part II.—Lands outside the clearance area comprised—12, 13, Nelson Place ; 7 to 9, 12, 13, 17, 23, 24, Nelson Row.

2 dwellings and 5 other buildings demolished.

11 persons (9 adults and 2 children) displaced.

Representation by M.O.H., dated 17th November, 1932. Order made by Council on 28th September, 1933. Public inquiry held by Inspector from Ministry of Health on 21st November, 1933. Order confirmed by Minister on 5th March, 1934.

Site retained by Corporation for re-development.

(13) *Laurel Row, No. 1 Area, Compulsory Purchase Order, 1933.*

Comprised—12 to 20, 33 to 41, Laurel Row ; 59 to 62, Lavender Street. 22 dwellings demolished.

84 persons (75 adults and 9 children) displaced.

Representation by M.O.H., dated 7th March, 1933. Order made by Council on 28th September, 1933. Public inquiry held by Inspector from Ministry of Health on 21st November, 1933. Order confirmed by Minister on 5th March, 1934.

Site retained by Corporation for re-development.

(14) *Laurel Row, No. 2 Area, Compulsory Purchase Order, 1933.*

Comprised—23 to 25, 27 to 29, Laurel Row ; 7, Upper Bedford Street. 7 dwellings in Order as confirmed—8 dwellings demolished.

25 persons (20 adults and 5 children) displaced.

Representation by M.O.H., dated 7th March, 1933. Order made by Council on 28th September, 1933. Public inquiry held by Inspector from Ministry of Health on 21st November, 1933. Slightly modified Order (as set out) confirmed by Minister on 5th March, 1934.

Site retained by Corporation for re-development.

(15) *Claremont Row Clearance Order, 1933.*

Comprised—1 to 38, Claremont Row.

37 dwellings demolished.

162 persons (127 adults and 35 children) displaced.

Representation by M.O.H. dated 18th November, 1932. Order made by Council on 28th September, 1933. Public inquiry held by Inspector from Ministry of Health on 21st November, 1933. Order confirmed by Minister on 28th September, 1934.

(16) *Mount Pleasant and Park Place Area Compulsory Purchase Order, 1934*

Part I.—Lands within the clearance area comprised—68, 69, Edward Street ; 1 to 11, 14, 19 to 22, 24 to 26, 28 to 32, 37 to 39, Mount Pleasant ; 11, Devonshire Terrace ; 2 to 5, 7 to 28, 30, 31, Park Place.

58 dwellings in Order as confirmed—66 dwellings demolished.

241 persons (182 adults and 59 children) displaced.

Part II.—Lands outside the clearance area comprised—13, 23, 36, 40, Mount Pleasant ; 70, 72, Edward Street ; 23a, 29, Park Place.

4 dwellings and 5 other buildings demolished.

13 persons (12 adults and 1 child) displaced.

Representation by M.O.H., dated 29th November, 1933. Order made by Council on 26th April, 1934. Public inquiry held by Inspector from Ministry of Health on 19th June, 1934. Slightly modified Order (as set out) confirmed by Minister on 28th September, 1934.

Site retained by Corporation for re-development.

(17) *Kent's Court and Bodle's Court (No. 1 Area) Clearance Order, 1934.*

(18) *Kent's Court (No. 2 Area) Clearance Order, 1934.*

(19) *Gerrard's Court Area Clearance Order, 1934.*

(20) *Albion Cottages Area Clearance Order, 1934.*

(21) *Albion Street Area Clearance Order, 1934.*

(22) *Regent's Court Area Clearance Order, 1934.*

(23) *North Street Area Clearance Order, 1934.*

(24) *Mount Street Area Clearance Order, 1934.*

Combined areas (17 to 24) designated above comprised—6 to 11, Kent's Court ; 1 and 2, Bodle's Court ; 1 and 2, Kent's Court ; 1 to 3, 7 to 9, 11, 12, Gerrard's Court ; 11 and 12, Albion Cottages ; 18 to 23, Albion Street ; 1 to 6, Regent's Court ; 101 to 103, North Street ; 16 to 19, Mount Street.

39 dwellings—37 have been demolished.

159 persons (118 adults and 41 children) displaced.

Representations by M.O.H., dated 27th to 30th November, 1933. Orders made by Council on 26th April, 1934. Public inquiry held by Inspector from Ministry of Health on 19th June, 1934. Orders confirmed by Minister on 28th September, 1934.

(25) *William Street and Henry Street (No. 1 Area) Clearance Order, 1934.*

(26) *William Street and Henry Street (No. 2 Area) Clearance Order, 1934.*

These two areas comprised—13, 20 to 22, Henry Street ; 34 to 58, William Street ; 1 to 3, Henry Street.

32 dwellings—21 have been demolished.

238 persons (186 adults and 52 children) displaced.

Representations by M.O.H., dated 6th February, 1934. Orders made by Council on 21st June, 1934. Public inquiry held by Inspector from Ministry of Health on 18th September, 1934. Orders as set out (the first after slight modification) confirmed by Minister on 22nd December, 1934.

Accommodation for displaced persons to be provided in houses and flats to be built by Corporation on Manor Farm Estate and on Woburn Place site.

- (27) *Ivory Place Compulsory Purchase Order, 1935.*
- (28) *North Street Cottages Compulsory Purchase Order, 1935.*
- (29) *Jew Street Compulsory Purchase Order, 1935.*
- (30) *St. John's Place Compulsory Purchase Order, 1935.*
- (31) *Russell Place Compulsory Purchase Order, 1935.*
- (32) *Russell Place Clearance Order, 1935.*
- (33) *St. James Gardens Compulsory Purchase Order, 1935.*
- (34) *Lewis's Buildings Compulsory Purchase Order, 1935.*
- (35) *Preeces Buildings Compulsory Purchase Order, 1935.*
- (36) *Marine View Compulsory Purchase Order, 1935.*
- (37) *Carlton Place (No. 1 Area) Compulsory Purchase Order, 1935.*
- (38) *Carlton Place (No. 2 Area) Compulsory Purchase Order, 1935.*
- (39) *Carlton Place (No. 3 Area) Compulsory Purchase Order, 1935.*
- (40) *Oxford Court and Oxford Street Compulsory Purchase Order, 1935.*
- (41) *Hayllars Cottages and Willow Cottages Compulsory Purchase Order, 1935.*
- (42) *Dorset Buildings Compulsory Purchase Order, 1935.*
- (43) *Frederick Place and Frederick Cottages Clearance Order, 1935.*
- (44) *Edwin Place (No. 1 Area) Compulsory Purchase Order, 1935.*
- (45) *Edwin Place (No. 2 Area) Compulsory Purchase Order, 1935.*

Combined areas (27 to 45) designated above comprised

PARTS I.—Lands within the clearance areas : 9 to 23, Ivory Place ; 1 to 5, North Street Cottages ; 1 to 4, Jew Street ; 1 to 18, St. John's Place ; 1 to 9, St. James Gardens ; 1 and 2, Lewis's Buildings ; 3 to 12, Preeces Buildings ; 1 to 9, 9A to 14, Marine View ; 1 to 3, 5 and 6, 8 to 10, Carlton Place ; 1 to 8, 10 to 12, Russell Place ; 32 to 36, Oxford Street ; 2, 3, 8 to 15, 18 to 20, Oxford Court ; 1 to 10, Hayllars Cottages ; 1 to 3, Willow Cottages ; 9 to 15, Dorset Buildings ; 43 and 44, Frederick Place ; 2 to 6, Frederick Cottages ; 1 to 8, 12 to 24, Edwin Place.

163 dwellings and 5 other buildings—101 dwellings have been demolished.
602 persons (506 adults and 96 children) displaced.

PARTS II.—Lands outside the clearance areas : 6 to 8, Ivory Place.

3 dwellings demolished.

10 persons (all adults) displaced.

Representations by M.O.H., dated 5th and 9th October and 22nd November, 1934. Orders for areas (27 to 31) were made by the Council on 23rd May, 1935. Public inquiry held by Inspector from Ministry of Health on 10th September, 1935. Orders confirmed by Minister on 5th November, 1935 (except for area (31) for which a new order—area (32)—was made on 12th December, 1935, and confirmed by Minister without further public inquiry on 18th January, 1936). Orders for areas (33 to 45) were made by the Council on 26th September, 1935. Public inquiry held by Inspector from Ministry of Health on 4th December, 1935. Orders confirmed by Minister (areas (38) and (40) after slight modification) on 7th March, 1936.

Accommodation for displaced persons from areas (12 to 45) to be provided in houses and flats to be built by Corporation ; 348 houses on Manor Farm estate and 48 flats on Woburn Place site (Milner Flats).

The actual re-housing of the displaced persons was as follows :—
1,045 on Manor Farm estate, 263 in Milner Flats, 174 in other Corporation houses and flats ; 348 found their own accommodation.

HOUSING ACTS, 1930 AND 1936.

(46) *Wellington Place and Blucher Place Compulsory Purchase Order, 1936.*

(47) *Upper Russell Street (No. 1 Area) Compulsory Purchase Order, 1936.*

(48) *Upper Russell Street (No. 2 Area) Compulsory Purchase Order, 1936.*

(49) *High Street and Cavendish Street Compulsory Purchase Order, 1936.*

(50) *Cavendish Street Compulsory Purchase Order, 1936.*

(51) *Telegraph Street Compulsory Purchase Order, 1936.*

(52) *Nelson Street, etc., Compulsory Purchase Order, 1936.*

Combined areas (46 to 52) designated above comprised :—

PARTS I.—Lands within the clearance areas : 1 to 4, 8, 9, Wellington Place ; 22 to 34, Blucher Place ; 13, 14, 14A, 18 to 20, 30, 31, Upper Russell Street ; 4 to 11, 11A, 15 to 18, High Street ; 2 to 4, 6 to 8, 11 to 19, 22, 26 to 30, 35 to 44, 46 to 49, 54 to 58, 60 to 62/3, Cavendish Street ; 6, 8, Telegraph Street ; 1 to 10, 13 to 17, 20 to 26, 30, 31, 34 to 37, 39 to 49, Nelson Street ; 116, Sussex Street ; 23 to 25, Carlton Hill. 20, 21, Cavendish Street ; 7, 9, Telegraph Street ; 11, 12, 18, 19, 27, 32, 38, Nelson Street which belonged to the Corporation were excluded from the Orders but not from clearance areas (50 to 52).

138 dwellings—4 have been demolished.

624 persons (497 adults and 127 children) to be displaced.

PARTS II.—Lands outside the clearance areas : 5 to 7, Wellington Place ; 21, 29, 32, Upper Russell Street ; 115, 117 to 122, Sussex Street ; 28, 29, Nelson Street ; 22, 26, Carlton Hill.

13 dwellings and 2 other buildings—3 dwellings have been demolished.
42 persons (39 adults and 3 children) to be displaced.

Representations by M.O.H., dated 9th October, 1935. Orders made by Council on 2nd July, 1936. Public inquiry held by Inspector from Ministry of Health on 6th October, 1936. Slightly modified orders (as set out) confirmed by Minister on 13th January, 1937.

HOUSING ACT, 1936.

- (53) *Richmond Hill, Carlton Street, etc., Compulsory Purchase Order, 1937.*
- (54) *Everton Place Area Compulsory Purchase Order, 1937.*
- (55) *Vine Street (No. 1 Area) Compulsory Purchase Order, 1937.*
- (56) *Vine Street (No. 2 Area) Compulsory Purchase Order, 1937.*
- (57) *Warwick Street Area Compulsory Purchase Order, 1937.*
- (58) *South Street Area Compulsory Purchase Order, 1937.*

Combined areas (53 to 58) designated above comprised :—

PARTS I.—Lands within the clearance areas : 2 to 15, 18 to 25, Richmond Hill ; 31, 32, Carlton Hill ; 111, 111A, 112, Sussex Street ; 2 to 22, 24, 26 to 30, 33 to 43, Carlton Street ; 1 to 6, Everton Place ; unnumbered house, Golden Lane ; 1 to 5, 13 to 20, Vine Street, 17, 17A, 18, Gloucester Road ; 26 to 31, Warwick Street ; 9 to 11, South Street.

25, Carlton Street which belonged to the Corporation was excluded from the Order but not from clearance area (53).

97 dwellings.

444 persons (348 adults and 96 children) to be displaced.

PARTS II.—Lands outside the clearance areas : 26, 27, 27A, 28, 28A, 29, 29A, 29B, 29C, 29D, 30 to 33, Richmond Hill ; 110, 113, 114, Sussex Street ; 1, 23, 31, 32, Carlton Street ; 14, Western Street ; 8, South Street.

29 and 30, Carlton Hill which belonged to the Corporation were excluded from Order (53).

13 dwellings and 15 other buildings.

35 persons (all adults) to be displaced.

Representations by M.O.H., dated 9th October, 1935, for area (53) and 23rd November, 1936, for areas (54 to 58). Orders were made by Council on 28th January, 1937, for area (53) and on 25th February, 1937, for areas (54 to 58). Public inquiry held by Inspector from Ministry of Health on 13th April, 1937. Orders confirmed by Minister (areas (53) and (57) after slight modification) on 22nd July, 1937.

Accommodation for displaced persons from areas (46 to 58) to be provided in houses and flats to be built by Corporation ; 144 houses on East Moulsecoomb estate, appropriating 101 houses built for other housing purposes and 48 maisonettes and 11 flats on Nelson Place site.

(59) *Bond Street Cottages Area.*

(60) *Bread Street No. 1 Area.*

(61) *Bread Street No. 2 Area.*

- (62) *Bread Street No. 3 Area.*
 (63) *New Dorset Street No. 1 Area.*
 (64) *New Dorset Street No. 2 Area.*
 (65) *Essex Street Area.*
 (66) *Sloane Street Area.*
 (67) *Spring Gardens No. 1 Area.*
 (68) *Spring Gardens No. 2 Area.*
 (69) *Tillstone Street Area.*

Combined areas (59 to 69) designated above comprised—1, 2, Bond Street Cottages ; 26 to 36, 38, 39, 41 to 43, Bread Street ; 26 to 33, Tichborne Street ; 94, 95, Church Street ; 7, 7A, 8 to 14, 16 to 32, 32A, 33 to 35, 43 to 58, New Dorset Street ; 30, 32, 34, 36, 38, 40, 42, 44, 46, Centurion Road ; 30 to 45, Essex Street ; 1 to 9, Sloane Street ; 5, 7, Freshfield Road ; 1 to 4, 12 to 22, Spring Gardens ; 51, 53, 55, 57, 59, 61, 63, 65, Tillstone Street.

133 dwellings.

468 persons (383 adults and 85 children) to be displaced.

Representations by M.O.H., dated 8th and 15th September, 1937.

SUMMARY.

Schemes.	Year.	Unfit dwellings represented by M.O.H.	Dwellings demolished	No. OF PERSONS.		DISPLACED PERSONS.	
				Not yet displaced.	Displaced	Re-housed by Corporation.	Found own accommodation.
(1)	1889	106	106	—	329	150	179
(2)	1890	197	197	—	1113	1113	—
(3)	1898	180	180	—	725	725	—
(4)	1922	48	48	—	229	} 519	95
(5)	1924	67	67	—	385		
(6 to 11)	1931	196	200	—	999	819	180
(12)	1933	58	60	—	296	253	43
(13)	1933	22	22	—	84	} 92	17
(14)	1933	8	8	—	25		
(15)	1933	37	37	—	162	150	12
(16)	1934	67	70	—	254	186	68
(17 to 24)	1934	39	37	—	159	105	54
(25 and 26)	1934	34	21	—	238	184	54
(27 to 45)	1935	163	104	—	612	512	100
(46 to 52)	1936	142	7	369	297	250	47
(53 to 58)	1937	101	—	391	88	37	51
(59 to 69)	1937	133	—	468	—	—	—
TOTALS ...	...	1598	1164	1228	5995	5095	900

II. INDIVIDUAL HOUSES.

			<i>Year represented by M.O.H.</i>	<i>Dwellings demolished.</i>	<i>Persons displaced.</i>
<i>Housing Acts, 1890 to 1925</i> ...	...	...	1891 to 1929	196	
<i>Housing Act, 1930.</i>					
Gloucester Road ...	...	...	1931	1	4
Cannon Cottages ...	...	...	"	3	7
John Street ...	...	...	"	1	3
Downs Road, Woodingdean ...	...	...	1932	1	—
Vine Street ...	...	...	"	7	32
Laurel Row ...	...	...	"	11	44
North Road Cottages ...	...	...	"	4	10
Crescent Cottages ...	...	...	1933	14	55
Bedford Buildings ...	...	...	"	2	7
Home Farm Cottages, Moulse-					
coomb ...	...	...	"	2	4
Albion Street ...	...	...	"	1	2
Spring Gardens ...	...	...	1934	2	1
Belgrave Street ...	...	...	1935	1	2
Warren Avenue ...	...	...	"	4	14
Crescent Drive ...	...	...	"	1	6
Reservoir Road ...	...	...	"	1	2
Ridgeway ...	...	...	"	1	5
Longhill Road ...	...	...	"	1	1
Ovingdean Road ...	...	...	"	1	1
Valley Road ...	...	...	"	1	3
Occupation Road ...	...	...	1936	1	3
Black Cottage, Moulsecoomb ...	...	...	"	1	2
			Totals ...	258	208 (from 62 houses)

APPENDIX III.

30th March, 1938.

To the Housing Committee :

HOUSING.

LADIES AND GENTLEMEN,

Brighton is a holiday resort and shopping centre, a dormitory town to London and a place to which many people retire ; it is not an industrial town. Under these circumstances, a large proportion of its workers find employment in the centre of the town ; the only large works at a distance from the centre are Messrs. Allen West & Co., Ltd., who ordinarily employ some 1,500 workers. As the lower paid workers cannot pay for transport to the outskirts, they must continue to live near the centre until the Council sees its way to subsidise transport. This, from the health point of view, must be strongly urged, for whilst adults may live healthy lives housed in the town, the children need the more open environment of the country. This is particularly so in Brighton, as there has been no attempt to provide numbers of children's playgrounds, so scattered as to be quite near aggregations of working-class houses. It is unfortunate that when open spaces are made available these are thought to be too valuable to be spared for this purpose, but are planned for rehousing or commercial purposes. Cases in point are the St. Mary's Hall playing field in Eastern Road, and the west side of Carlton Street adjoining St. John's School playground.

There are three ways in which the scarcity of housing accommodation near the centre can be overcome. The first is simply to continue building houses on the outskirts. If this were combined with subsidised transport, an active clearance of unhealthy houses could be continued and the poorer families moved to the outskirts. This is the best scheme from the health point of view. Failing subsidised transport, the new houses would be occupied by families from the centre able to pay bus fares and the houses they left would become available for the poorer families, but the move round would be slower and the programme of the clearance of unhealthy houses would have to be slowed down for a time.

The other two ways involve the building in the centre of (a) houses, or (b) tenements, to replace condemned houses ; both methods are bad from the health point of view as the density of housing in the centre is already too great. The Committee will remember that the census figures of 1921 shewed 56 persons to each of the 2,545 acres then included in the Borough. This density was greater than that of any area outside of London, in which West Ham had a density of 64 to the acre. If, however, both the subsidy of transport and the slowing down of the housing programme are ruled out, then the choice must lie between houses and high tenements near the centre.

At the moment the only site available for the building of houses at no great distance from the centre is the Hollingdean site, but this means building on land at present occupied by allotments. No one wants to displace allotment holders, but in this case the total area of allotment land need not be altered but only moved some 400 yards further north.

If it is decided that under no circumstances must allotment ground be interfered with, then the only way in which the necessary new dwellings can be provided is by the worst method, the erection of tenement buildings ;

it is generally agreed that high tenement houses for the working classes should only be built when there is no other way out. For this purpose various sites have been suggested.

It is quite impossible to say how many new houses will be required in the future, but the building of two hundred houses could safely be proceeded with at once for families likely to be displaced from unhealthy areas, overcrowded houses, and unhealthy basements.

I am,

Yours obediently,

DUNCAN FORBES,

Medical Officer of Health.

APPENDIX IV.

REPORT REGARDING THE RHEUMATISM CLINIC AT THE ROYAL YORK BUILDINGS, BRIGHTON.

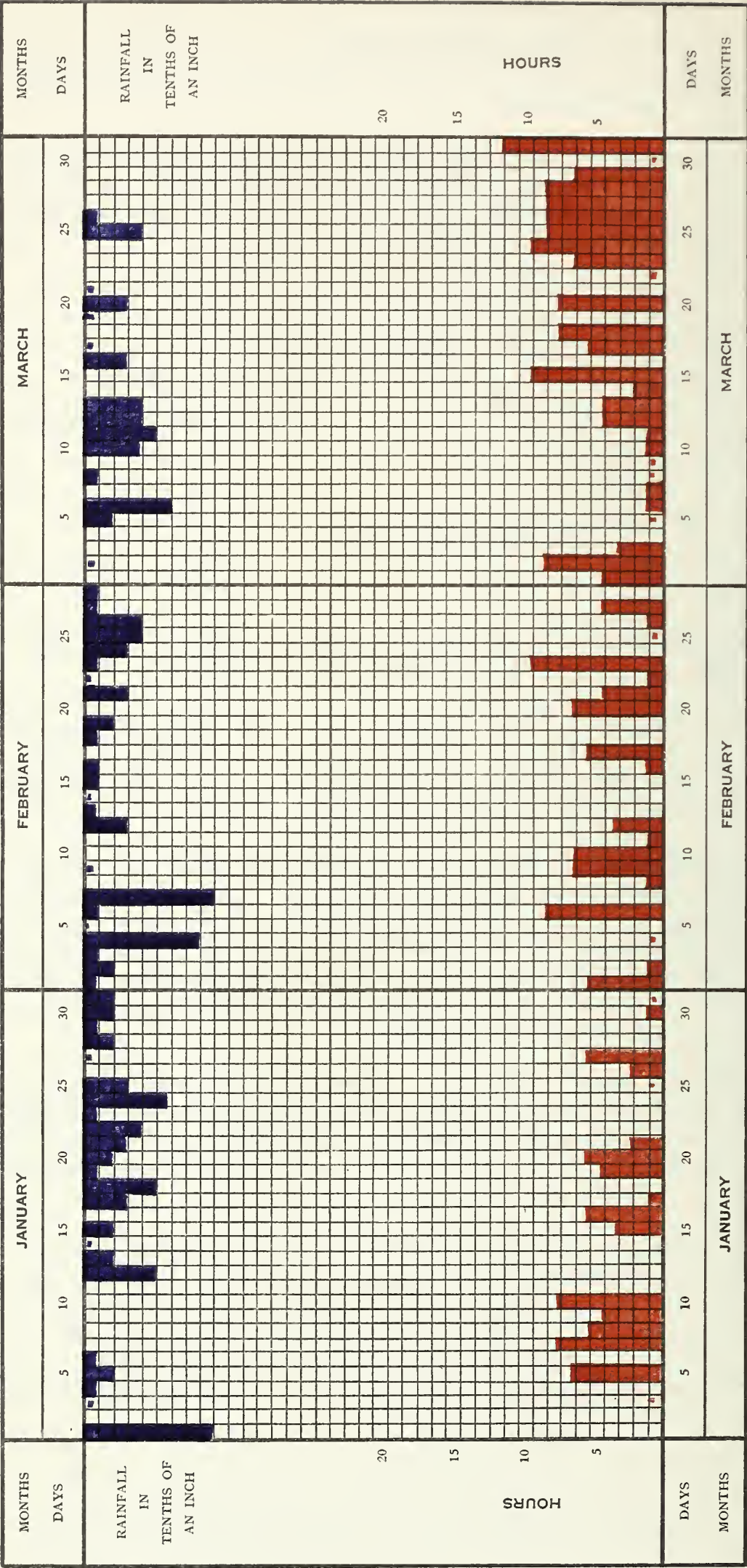
The Clinic is staffed by the following Honorary Medical Officers : Doctors F. E. Graham-Bonnalieu, V. E. Claxton, W. Corner, O.B.E., F. Knott, Sir Charles Grey, Bart., and Dr. Roberts ; Dr. C. G. Whorlow (Radiologist), and Mr. J. M. Turner (Orthopaedic Surgeon).

The Clinic completed its eight year in February, 1938. It is open every Wednesday afternoon at 1.30 p.m. Treatment is free. Treatment still consists chiefly of vaccine therapy, but two years ago the scope of treatment was supplemented by the inclusion of massage, remedial exercises, and electrical treatment, which are carried out on three afternoons a week. This has been made possible by the kindness of the Massage Staff in accepting a very much reduced remuneration.

During the eight years, 1,974 new patients have been treated, and during the time that the Clinic has been open there have been about 90,000 attendances. During the past year there have been 220 new patients, and 12,750 treatments were given ; 2,212 of these were given by the Massage Department.

Of these 220 patients, 39 have not attended for a sufficient length of time for the results of treatment to be assessed. In the case of 54, results are either not known, the patients were not suffering from rheumatism, or the condition was such that it did not require more than one or two attendances. This leaves a total of 127 ; of these, 63 (49.5%) were, at the end of the year, much better ; 57 (45%) were definitely better ; and 7 (5.5%) were no better.

This year Mr. Duncan Hawes kindly offered his services as Chiropodist to the Clinic. These were gratefully accepted as it was realised that in some instances rheumatic conditions of the feet and knees were due to faulty conditions of the feet, which could be relieved by efficient chiropody.



RAINFALL

SUNSHINE

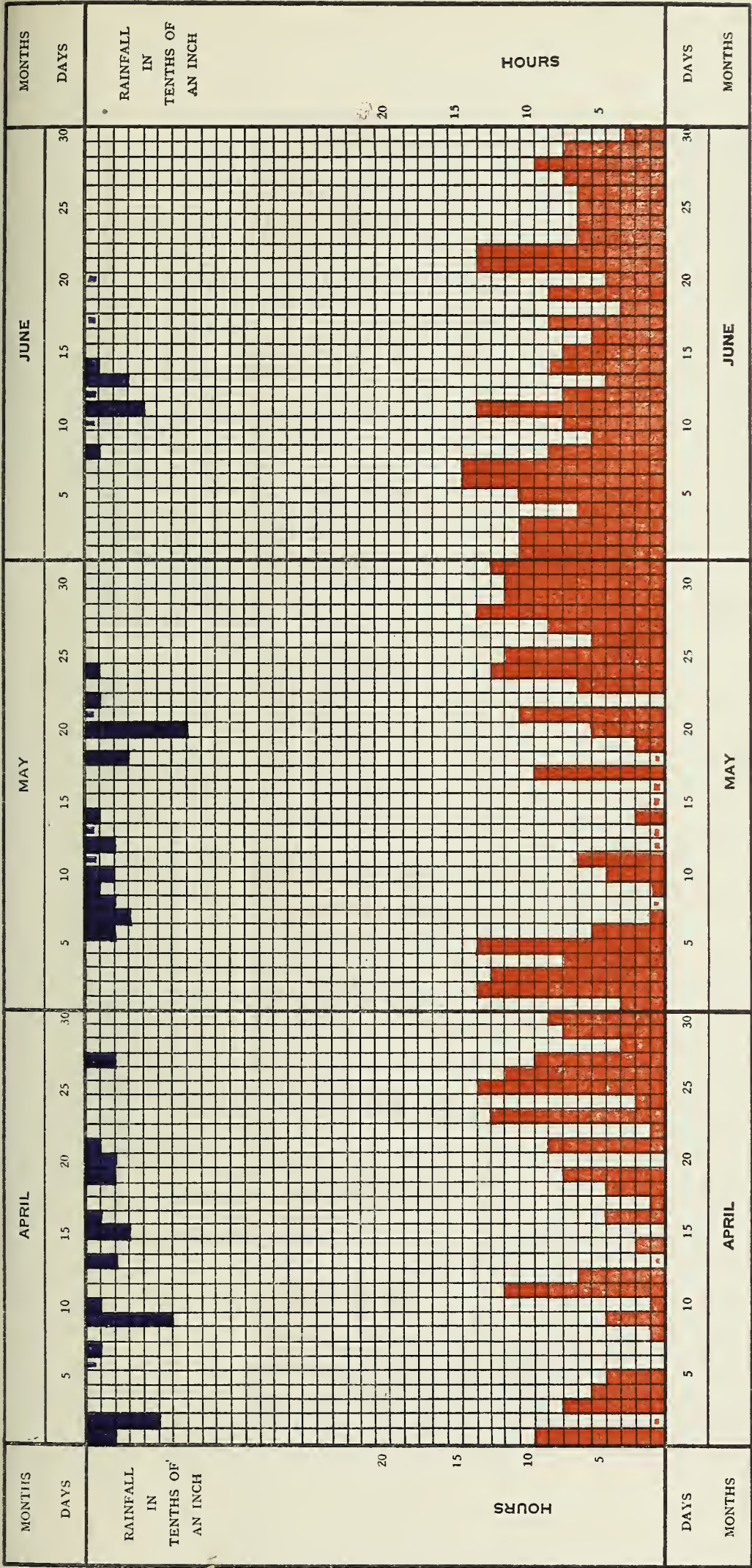
1937

EACH SQUARE EQUALS ONE-TENTH OF AN INCH.

EACH SQUARE EQUALS ONE HOUR.

• Denotes Days with Measurements from .008 to .05 Inches.

• Denotes Days with Duration of 0.1 to 0.5 Hours.



RAINFALL

1937

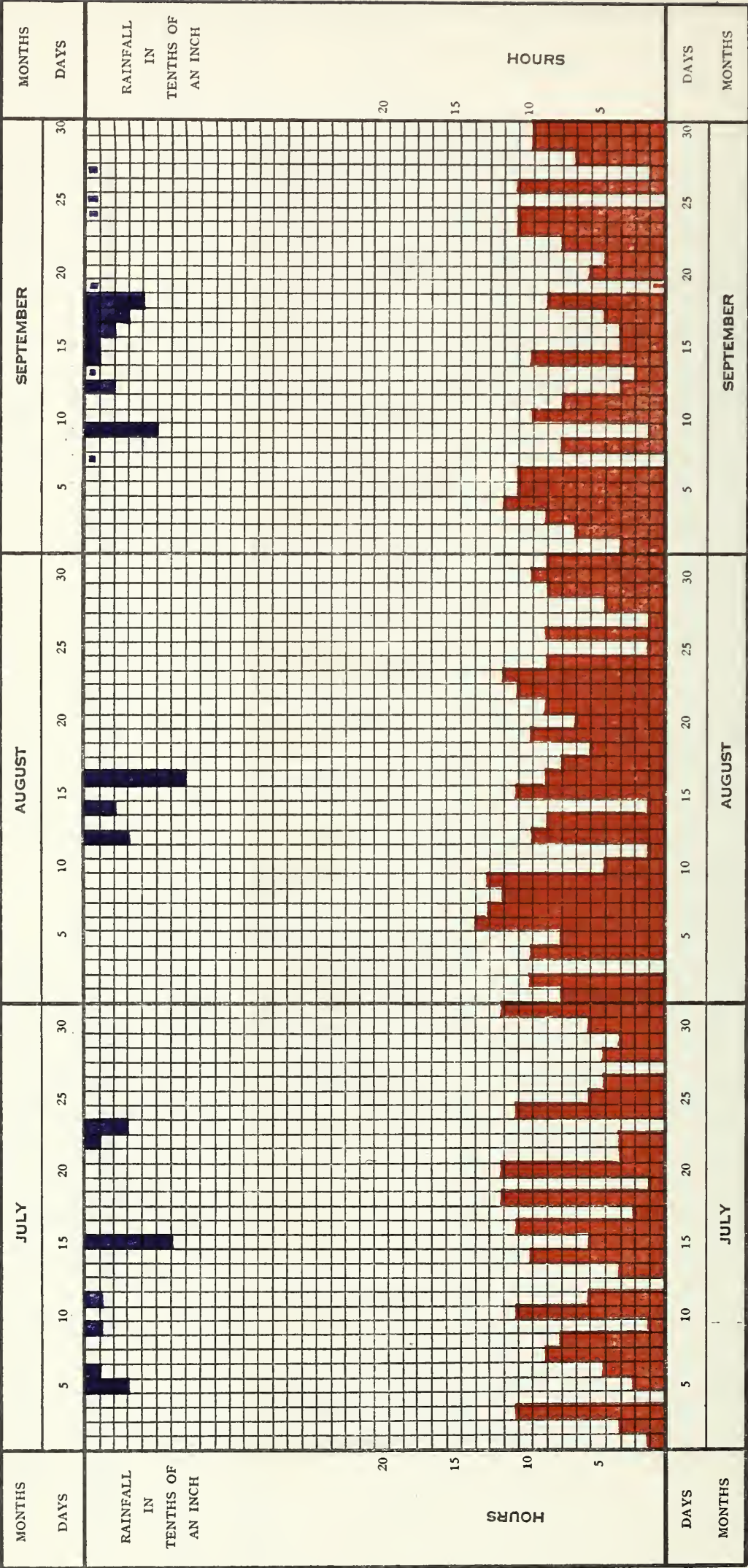
SUNSHINE

EACH SQUARE EQUALS ONE-TENTH OF AN INCH.

EACH SQUARE EQUALS ONE HOUR.

• Denotes Days with Measurements from .008 to .05 Inches.

• Denotes Days with Duration of 0.1 to 0.5 Hours.



RAINFALL

SUNSHINE

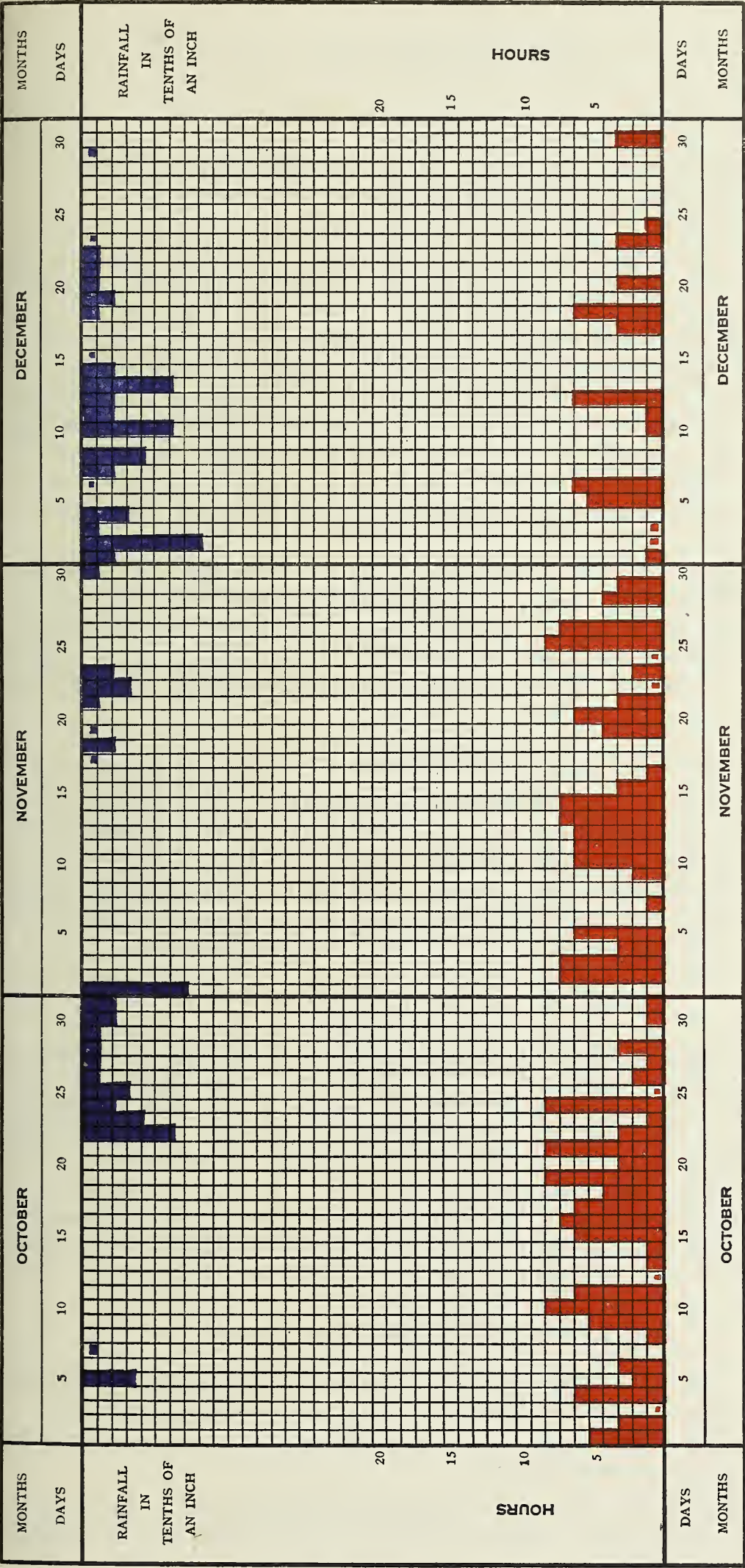
1937

EACH SQUARE EQUALS ONE-TENTH OF AN INCH.

EACH SQUARE EQUALS ONE HOUR.

Denotes Days with Measurements from .008 to .05 Inches.

Denotes Days with Duration of 0.1 to 0.5 Hours.



RAINFALL **1937** **SUNSHINE**
EACH SQUARE EQUALS ONE-TENTH OF AN INCH. EACH SQUARE EQUALS ONE HOUR.

■ Denotes Days with Measurements from .008 to .05 Inches. ■ Denotes Days with Duration of 0.1 to 0.5 Hours.

APPENDIX VI.

THE RISK OF POLLUTION OF THE WATER SUPPLY DURING THE EXTENSION OF ADITS.

I think it well to put on record when steps were first taken in Brighton to protect the water supply whilst men were at work in the wells increasing the water supply by the driving of adits. These adits are usually driven across the direction of the natural flow of the water and their object is to tap streams of water in the chalk. The work is undertaken in dry seasons when the level of water in the wells is low and the water in the adits can be kept low by continuous pumping. In Brighton, whilst the extension of the adits is in progress, the water is pumped practically direct into the mains, the reservoirs being of small capacity. Another important fact is that the working points may be a half to three-quarters of a mile from the winding shafts.

In July, 1922, I learned that adit driving was in progress at Mile Oak, and later similar work was begun at Falmer. In a report to the Waterworks Committee dated 26th August, 1922, I went very fully into the matter, pointing out the risks entailed and how these might be avoided. Space prevents my including a copy of the report, but the extracts below shew what I advised.

" THE RISK ENTAILED.

The danger to the Brighton water supply is the pollution of the water by the underground workers, either by their own excreta (faeces or urine) or, less likely, by excreta carried on their boots from the surface. If the water became polluted a large number of persons might suffer from diarrhoea, and if the pollution was from an infective carrier of enteric fever an outbreak of typhoid fever would ensue.

AN OUTBREAK UNLIKELY.

When a man suffers from enteric fever he is usually so ill that he remains in bed, and it is only occasionally that he continues at work, as in the case of the worker at Caterham, and also it would be very bad luck if any of the 20 or 30 men employed underground should happen to be a typhoid carrier. I wish the Committee to recognise that the chance of pollution of the water with typhoid fever organisms is very small. At the same time, there is a chance of pollution under the present system, and if such occurred a large outbreak of enteric fever would follow and the harm done to the town would be enormous.

ADDITIONAL PREVENTIVE MEASURES.

It was for this reason that as soon as I became aware that work was proceeding I consulted with the Town Clerk and advised that

- (a) the faeces and urine of the men employed should be tested for the germ of enteric fever,
- (b) the water from the adits should be chlorinated or, failing this, that the supplies from wells where work was in progress should be chlorinated.

The first suggestion is a 'pis aller' as the 'healthy carrier' may excrete the germ only from time to time and, naturally, the specimens might give negative results. As, however, Mr. Hawkesley advised that chlorination was unnecessary, the laborious process of collecting samples from the men employed was begun. I explained the position to Dr. Galt, the pathologist at the Ralli Laboratories, and he has been good enough to undertake the work of searching for typhoid germs in the specimens at cost price (3/6 each) seeing that it is work of great public utility. *Unfortunately, this laborious method, as indicated above, does not exclude the typhoid carrier with any certainty.*

Chlorination.—Extensive research work has been done by Sir Alexander Houston for the Metropolitan Water Board with regard to chlorination, and a part of the very hard London supply is now regularly purified by chlorination with successful results. If the Mile Oak and Falmer supplies were chlorinated there would be no risk of an outbreak of enteric fever even if a typhoid carrier defecated in the adit."

At that time I was in touch with the Ministry of Health on the matter, and an extract from a letter to Dr. Wheaton is as follows:—

"As an outbreak will occur sooner or later if authorities are not warned, although it is long odds against it in any one particular case, would it not be best for the Ministry to give local authorities depending on well supplies some general instruction on the point."

Later my report, and that of a consulting water engineer who strongly opposed chlorination, were considered by the General Purposes Committee on 21st September, 1922, who passed a resolution that chlorination should not be undertaken.

In November, 1922, I reported to the Waterworks Committee that tests had been made on the faeces and urine of 125 workers, and that typhoid bacilli had been found in the faeces of a new worker, not on the first but on the second test. Later, in February, I further reported that out of a total of 131 workers two had been ascertained to be carriers of typhoid bacilli in their faeces.

In 1930 I again raised the question of chlorination, and sent the following letter, dated 10th September, 1930, to Sir George Newman. I may say that at that time both the Town Clerk and Water Engineer were opposed to chlorination.

"Brighton draws its water supply from five wells, and the water is encouraged to flow into the wells by headings driven from the wells into the chalk. These headings are quite large underground tunnels extending sometimes for perhaps a half or three-quarters of a mile. I have always felt anxious about our pumping water for consumption when men of the nature of navvies are working in the headings. Naturally, every precaution is taken in warning the men and, in as far as possible, excluding typhoid carriers, but I should feel much safer if the water were actually chlorinated.

I prepared a report for the Health Committee but, before submitting it, let the Water Engineer and the Town Clerk know what I proposed doing, and the Town Clerk has suggested that we consult with the Ministry before bringing the matter up to the Health Committee,

I send a copy of my proposed report, the Town Clerk's letter, and the report of the Water Engineer.

Perhaps you will be so good as to let us have an interview at some convenient time with some expert on this question so that we might go to the Council with an expert opinion in favour or otherwise of chlorination."

The following letter from one of the staff of the Ministry of Health did not suggest that they regarded the matter seriously.

"Speaking without the book, I think this is the first time anyone has suggested the necessity of introducing chlorination as a precaution against possible contamination of a water supply during adit workings. We have always recognised that the risk is there, but our experience of the last 30 years seems to show that it may be regarded as negligible, and particularly so where reasonable precautions are taken, as at Brighton."

In a report dated the 25th September, 1930, I again warned the Waterworks Committee of the danger of pumping water unchlorinated direct into the supply whilst men were at work in the adits.

"I wish to call attention to the risk of pollution of Brighton's water supply at times when headings are being driven. On these occasions, over a dozen men are at work underground, and if any of these is a carrier of typhoid fever and is careless of his excreta, the polluted water might be drunk 6 hours later and give rise to an explosive outbreak of the disease.

PRECAUTIONS.

Naturally, Mr. Cathcart and I collaborate to minimise the risk. Each worker, before being allowed to work underground, has two samples of faeces and one of urine taken for examination by Dr. Galt at the Ralli Laboratory. Unfortunately this test may fail as a carrier may excrete typhoid bacilli only at intervals. We have therefore no definite assurance that all typhoid carriers are excluded from underground work.

The men are warned of the dangers, and satisfactory provision is made for them to make water underground and to be brought to the surface to the earth-closet. The arrangement for bringing the urine along the adits and to the surface are also satisfactory. The only danger, therefore, is if a man is careless or is taken short anything up to a mile from the winding shaft. In such a case there are numbers of hollows in the walls of the adit into which he could retire, and thereafter cover the dejecta with loose chalk.

CHLORINATION.

The only further precaution which could be taken is chlorination, which would make the water safe but would lead to complaints from numbers of people with a palate sensitive to the peculiar iodoform taste which chlorinated water acquires, and which can be avoided only by dechlorination, which Mr. Cathcart finds would be expensive to apply in Brighton.

The chances are all against an outbreak of typhoid fever, but if such an outbreak did occur it would be a far more serious affair than the sore throat outbreak in December last. I may say that Mr. Cathcart and I

had a talk with a doctor and engineer at the Ministry of Health. The Ministry have taken no steps to protect the country generally against the risk probably because it is over 30 years since the outbreaks at Worthing and Caterham occurred, and a large amount of driving has been done from wells since that time.

Naturally, as your Medical Officer of Health, I recommend chlorination and dechlorination, but it is for you to judge whether or not it is worth while. The suggestion was made at the Ministry that you might take the advice of an expert. If you do not decide on chlorination, I should advise that Mr. Cathcart should keep in touch with the latest methods so that the subject may be reconsidered if any advance be made on present methods."

The Waterworks Committee resolved :—

"That the Waterworks Engineer is instructed, with yourself, to take all possible precautions when headings are being driven against pollution of the water by the men engaged on the work, but the Committee are not prepared to recommend chlorination and dechlorination of the water, as suggested by you."

Fortunately for Brighton, an outbreak of typhoid occurred at Croydon in November, 1937, and thereafter the Waterworks Committee* agreed that in future sterilisation by chlorine or otherwise should be added to the precautions already taken to prevent water-borne infection; these precautions are set out in the following paper to the *Lancet* dated 5th March, 1938 :—

WATER-BORNE TYPHOID

At the present time when so much thought is being given to the purity of water as distributed to the consumer, and the steps which should be taken to prevent the spread of water-borne typhoid, I think it worth while to draw attention to some of the earlier water-borne outbreaks. These should give us some guidance in framing preventive measures for the future.

SOME OUTBREAKS IN ENGLAND.

Caterham and Red Hill, 1879.—Population, 16,000 ; cases, 358 ; deaths, 21. The water-supply was infected by an adit worker suffering from ambulatory typhoid fever and uncontrollable diarrhoea.

Worthing, 1893.—Population, 17,200 ; cases, 1,416 ; deaths, 188. Before the outbreak men were at work in an adit. Day workers complained of the nuisance caused by members of the night shift defaecating in the adit. A rush of water drove the workers from the adit and polluted water gained entrance to an adjacent well and so to the mains.

Maidstone, 1897.—Population, 34,000 ; cases, 1,700. The gathering ground included arable land near the surface of which were pipes with open joints which conducted water to the springs. Immediately before the outbreak the ground in the neighbourhood of the springs was plentifully covered with human excreta. Colon bacilli was present in 1 ml.

Coventry, 1901.—Cases, 60. There was a shallow well near which a case of enteric fever was nursed, and the ground close by had been excavated just before the outbreak.

Beverley, 1904.—Population, 13,183. There were 400 cases of diarrhoea followed by 32 cases of typhoid fever. An outbreak had occurred in 1885 when the wells were polluted from an adjacent sewage farm. The chalk in the neighbourhood is highly fissured and whilst driving an adit the workmen encountered a strong stream of water heavily charged with surface sand and gravel. The specific pollution was attributed to sewage entering the chalk three-quarters of a mile from the well, but more probably was from a sewage plant or its effluent which discharged into an open agricultural drain some 600 yards from the well.

* See also Circular 1684 of Ministry of Health,

Lincoln, 1905.—Population, 54,000 ; cases, 1,058 ; deaths, 125. House drains were found to discharge into the catchwater drain from which part of the supply was drawn. The water before distribution was passed through inefficient sand filters which were raked over from time to time to increase the rate of flow.

Royal Marine Depot, Walmer, 1908.—Population, 1,073 ; cases, 33. The outbreak was due to infection of water in the swimming bath which was filled by the incoming tide. The intake was within 500 yards from the outfall of two sewers which contained the undisinfected faeces of typhoid patients. The flow of the tide was from the sewers to the intake and the water whilst the bath was being filled resembled storm water.

Swanage, 1910.—Cases, 24. Infection was traced to water from a well near some leaky sewers. Colon bacilli were present in 2 ml. and streptococci in 10 ml. of the well water.

Stroud, 1912.—Population, 13,428 ; cases, 71 ; deaths, 9. Men at work in well at the time water was infected but none was found to give a positive Widal reaction or to have typhoid bacilli in the urine (no note is made as to the examination of the faeces). The water in the mains showed *B. coli* in 1 ml. The well was in highly fissured chalk. There were numerous cesspools and probably leaky sewers in the immediate vicinity.

Kenilworth, 1913.—Population, 5,990 ; cases, 43. The sewer which received the drainage from a house in which a typhoid case was being nursed overflowed into a stream between 17th and 19th November. Water from this stream entered an adit from which the water-supply was drawn. Two cases sickened on 22nd November and 25 cases between 5th and 12th December.

Bedlington, 1918.—Cases, 141 ; deaths, 21. The contents of privy middens which were emptied on agricultural land and other faecal matter polluted the river from which the supply was drawn. The water was passed through sand filters which a severe frost followed by a sudden thaw, had rendered inefficient.

Bolton-on-Deerne and neighbouring villages, 1921.—Population, 20,000 ; cases, 397 ; deaths, 45. Two outbreaks. The first was due to polluted water from old mine workings. Coliform organisms were present in 0.1 ml. A second larger outbreak was due to pollution of the public pump well. Coliform organisms were present in 0.1 ml. and *B. enteritidis sporogenes* in 5 ml. The well was open to pollution from privy middens and from a quarry containing scattered faeces, both close to the well.

Buckie, 1931.—Cases, 34 ; deaths, 2. Typhoid carrier lived in a house which had a pail privy, the contents of which were emptied close to a stream. Considerably lower down in this stream lay a defective and leaking water-main which supplied the infected area. Another possible entry of infection was from under the spout of a well where pails from the above-mentioned house might have been swilled. From the grating below, the water was conducted into the Buckie main supply.

Denby Dale, 1932.—Population, 1,400 ; cases, 75 ; deaths, 11. One of the springs was supplemented from a stream polluted by drains. The spring water must have been polluted for years but no outbreak occurred until a young woman came from Scarborough to a cottage draining into the stream. She was notified as a case of typhoid on 17th September and was removed to hospital on 19th September. Between 8th and 20th October 50 more cases were notified.

Malton Urban Districts, 1932.—Population, 4,500 ; cases, 270 ; deaths, 23. At the time of infection there was a case of typhoid in hospital, whose faeces entered the drain undisinfected. The drain was so fractured as to cause disconnection and its contents discharged into a cavity in the oölite where it quickly disappeared. The underground flow was towards the Lady well 250 yards away from which the supply was pumped. The well water contained colon bacilli in 1 ml.

Bournemouth and Poole, 1936.—Cases, 518 ; deaths, 51. The infection was spread by milk, but the milk was probably infected by water from a stream which received the sewage of a house in which a carrier lived. Typhoid organisms were at times found in large numbers in this sewage. The sewage was discharged into the stream 85 yards from the cows' drinking-place and their teats may have been infected.

Croydon, 1937.—Population at risk between 36,000 and 40,000 ; deaths, 42.

		Cases		Primary		Secondary	
In Croydon	...	311	...	295	...	16	
Outside	...	31	...	28	...	3	
Total	...	342	...	323	...	19	

A well was infected at a time when men, one of whom was a carrier, were working in it and its water was being pumped unfiltered and unchlorinated direct into the supply.

Those responsible for the purity of water-supplies should study the admirable reports on these and other outbreaks by the medical officers of the Local Government Board and the Ministry of Health, and should consider whether their supplies are exposed to similar risks; such a study is likely to be reassuring.

INDICATIONS FOR CHLORINATION.

In normal times when no work is being done in the headings, the precautions taken must depend on the character of the soil, the direction of flow of underground water, the rate of the rise of level of underground water after rain, the depth of the cone of depression, and above all the proximity of cesspools or drains and the possibility of a quick flow of sewage from these to the well or its headings. The investigation of these points is the combined work of the water engineer and the medical officer of health, who should consult together and review the position from time to time.

Under such varying conditions it is impossible to say how often well water should be tested bacteriologically. To take extremes; if cesspools or drains discharge their contents into highly fissured chalk upstream or in the vicinity downstream, then the water should be continuously chlorinated. Under such circumstances we should not await polluted samples to warn us of danger. If on the contrary the chalk is compact and the rise of the level of water in the wells is very gradual, even after heavy rains, and there are no cesspools or drains within a quarter of a mile, then monthly examinations of the well waters should suffice. Even if colon bacilli are found in 100 ml. there is no need for panic, but samples should then for a time be taken weekly and if the bacilli persist and appear in, say, 20 ml., the water should be chlorinated. The occasional presence of colon bacilli in 100 ml. need not cause any alarm, as practical experience does not suggest that this points to the spread of typhoid.

In 1910 I abandoned routine disinfection after scarlet fever and diphtheria in favour of a "spring clean" because I believed infection came direct from a carrier and not from attenuated scattered organisms. Applying the same principles to typhoid, whilst I dread infection from recently polluted water, I have no fear of gradual soakage from cesspools through compact chalk into underground water fifty feet or more under the surface and a quarter of a mile or more from a well, as even if pollution does occur the organisms are diffused and attenuated. I do not consider that under such circumstances the presence of colon bacilli in 100 ml. indicates a pollution which will give rise to infection.

I have no doubt that the pessimists will picture a typhoid carrier (an uncommon individual) specifically infecting a leaky cesspool which opens into a swallow hole in the compact chalk, and this in its turn draining direct into an underground stream which rapidly carries the sewage to an adit, the whole process being hastened by heavy rains. He will point to tests carried out about 1900 at Croydon when brine and known bacteria washed into a swallow hole or depression in the ground found their way into the Addington well, a distance of two miles, within 48 to 72 hours. But even so the optimist will say that it would be strange if monthly bacteriological examinations of the supply had not earlier shown definite signs of sewage pollution. I will remain an optimist until I am convinced by actual experience (I hope of others) that water-borne outbreaks do occur without monthly bacteriological examinations giving timely warning.

PRECAUTIONS WHEN HEADINGS ARE BEING DRIVEN.

It is quite a different matter when men are at work in the headings. Then if the water is not pumped to waste it should be chlorinated sufficiently to kill the typhoid group of organisms in diluted emulsions of faeces. In addition carriers should be excluded as far as possible by blood tests and the examination on more than one occasion of the faeces and urine of each man before he starts work in the headings, though these measures give no guarantee that all carriers will be excluded.

Before descending the shaft the workers should use pail-closets placed on cement floors and the pails should be emptied at a safe distance. The men should put on gum boots just before descending the shaft. Provision should be made for urination at the bottom of the shaft, at intervals in the headings, and near the site of work. Urine should be collected and brought to the surface in pails with tightly fitting covers. No smoking should be allowed underground as this encourages spitting. The workers should be warned of the danger from faeces and urine and should individually sign a pledge not to defaecate in the headings; the temptation may be great when they are working half a mile or more from the shaft.

As to the future, medical officers of health should regard it as their duty to keep themselves informed as to the precautions actually taken to prevent pollution of the water-supply. They should insist on chlorination when men are at work in a well or its headings and when they have reason to fear that leakage from cesspools or drains can find its way quickly into the well, but otherwise only if monthly examinations show the persistent presence of colon bacilli in 100 ml. and their presence at times in 20 ml. or less.

In this paper I have been intentionally dogmatic in the hope that I may provoke informed criticism which will assist the medical officer of health to judge how best to insure the safety of the water-supply of his area.

My thanks are due to the following medical officers of health who supplied me with unpublished information : Dr. O. M. Holden of Croydon, Dr. A. Ledingham of Banff, Scotland, and Dr. R. L. Thornley of East Riding.

Annual Report

ON THE

MEDICAL INSPECTION

AND

TREATMENT

OF

SCHOOL CHILDREN

OF THE

County Borough of Brighton

FOR THE YEAR 1937.

BY

DUNCAN FORBES, M.D., B.Sc., D.P.H.,
School Medical Officer,

AND

RUTHERFORD CRAMB, M.B., Ch.B., D.P.H.,
Senior Medical Officer.

BRIGHTON :
PELL (BRIGHTON) LTD., 105 CHURCH STREET.—(86506)

SCHOOL CLINIC,
59 GRAND PARADE,
BRIGHTON, 7.

MARCH, 1938.

To the Chairman and Members of the Children's Care Sub-Committee.

LADIES AND GENTLEMEN,

We beg to submit the Annual Report for the year ending 31st December, 1937, which deals with the work of the Medical and Dental Departments. We would specially draw attention to the analysis of defects found in the Entrant Group (see page 30), to the Dental Section of the Report (page 18), and to the Appendix regarding in-patient Orthopaedic Work (page 37).

We are, Ladies and Gentlemen,

Your obedient Servants,

DUNCAN FORBES,
RUTHERFORD CRAMB.

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SCHOOL CLINIC STAFF ON 31st DEC., 1937.

MEDICAL STAFF.

DUNCAN FORBES, M.D. (Edin.), B.Sc., D.P.H., School Medical Officer.

RUTHERFORD CRAMB, M.B., Ch.B. (Glasg.), D.P.H., Senior Medical Officer.

I. M. G. BISSET, M.B., Ch.B. (Aberd.), Assistant School Medical Officer.

J. N. MATTHEWS, L.R.C.P. (Lond.), M.R.C.S. (Eng.), D.P.H., Assistant School Medical Officer.

Mr. H. J. SEDDON, F.R.C.S., Orthopaedic Surgeon (monthly visit).

DENTAL STAFF.

D. MACKAY, L.D.S. (St. Andrews), Senior School Dentist.

S. E. CHARMAN, L.D.S., R.C.S. (Eng.), Asst. School Dentist.

G. DAKERS, L.D.S., R.C.S. (Eng.), Asst. School Dentist.

SCHOOL NURSES.

Miss E. KILLICK.

Miss K. O'BRIEN.

Miss V. HARDY.

Miss I. HILL.

Miss J. M. GOLDSMITH, C.S.M.M.G., Orthopaedic Nurse.

CLERICAL STAFF.

Mr. R. E. TICEHURST.

Miss D. SILVER.

Miss V. NANSCAWEN.

Miss G. JENKINS.

Miss L. C. AGATE.

GENERAL STATEMENT OF THE EXTENT AND SCOPE OF MEDICAL INSPECTION DURING 1937.

Population.

The Registrar-General estimates the population of Brighton to be 146,900. The area of the Borough is 12,565 acres.

Number of Schools.

There are 20 "Provided" Schools (including the Intermediate School, Warren Farm School, and the "Special" School for Mental Defectives) with 47 departments, and 15 "Non-Provided" Schools, with 21 departments. There are 5 Housecraft Centres and 2 Handicraft Centres.

School Accommodation and Attendance.

The total accommodation (including the Intermediate School and Warren Farm School, but excluding the "Special" School for Mental Defectives, and the Housecraft and Handicraft Centres) at the end of 1937 was 19,646, the average number on the registers for the year ended 31st March being 15,802, and the average attendance 14,207.

Co-ordination of Medical Services.

The co-operation existing between the School Medical Service and the other Health Services of the Borough has been referred to in previous Reports. This also applies to the School Dental Service; thus children under school age are referred from the Infant Welfare Centres for inspection and treatment; there is a dental inspection clinic for "toddlers"; expectant and nursing mothers are referred from the Ante-natal Clinics; and patients in the Sanatorium receive any necessary treatment.

Routine Medical Inspection.

Each school was visited twice during the year by the Medical Officers, for medical inspection purposes.

5,488 children in the three Code Groups (see next page, also Table I., page 29) were inspected. In addition, children found defective at a previous Medical Inspection, "Specials," *i.e.*, children brought forward for examination at the request of the parent, or on the suggestion of the Head Teacher, irrespective of the age of the child, were examined. In this way the majority of defective children were kept under observation.

The total number of children inspected in the Routine Groups was 120 more than in 1936; there being 116 more in the entrants' group, 90 more in the intermediates' group, and 86 less in the leavers' group.

AGE.	ENTRANTS.					
	3.	4.	5.	6.	Other ages.	Total.
Boys ...	22	332	472	100	53	979
Girls ...	19	285	486	105	63	958
Totals ...	41	617	958	205	116	1937

AGE.	INTERMEDIATES.		
	8.	9.	Total.
Boys ...	273	620	893
Girls ...	253	589	842
Totals ...	526	1209	1735

AGE.	LEAVERS.				
	12.	13.	14.	Other Ages.	Total.
Boys ...	560	275	15	102	952
Girls ...	485	276	16	87	864
Totals ...	1045	551	31	189	1816

	GRAND TOTAL.				
	Entrants.	Inter-mediates.	Leavers.	Other Ages.	Total.
Boys ...	926	893	850	155	2824
Girls ...	895	842	777	150	2664
Totals ...	1821	1735	1627	305	5488

The following table shows the percentage of children found to be requiring treatment at the routine medical inspection in the three Code Groups.

YEAR.	1937	1936	1935	1934	1933	1932	1931	1930	1929	1928	1927
Percentage of Entrants requiring treatment ...	13.3	13.2	13.7	11.5	12.3	12.3	16.2	18.8	20.9	24.1	24.7
Percentage of Inter-mediates requiring treatment ...	14.2	14.9	14.9	16.5	15.0	14.5	17.4	19.2	18.4	24.9	25.0
Percentage of Leavers requiring treatment ...	9.4	11.7	11.4	10.3	11.2	11.5	14.7	16.7	14.9	18.6	20.2

The number of defects found in the entrant group has at times been held to indicate a lack of attention to those of pre-school age as compared with the school child, and yet we find that the percentages of defects in the intermediate group is actually higher than in the school entrant. It is interesting, however, to analyse the defects actually found in the school entrant, and these are set out in Table II., page 30.

The total number of entrants examined was 1,821, of whom 243 required treatment, giving a percentage of entrants found defective of 13.3.

Sixty per cent. of defects requiring treatment can be classified under three headings :—

<i>Tonsils and adenoids</i> constituted	105	} 159
<i>Defective vision and squint</i> constituted	...	...	29
<i>Minor skin conditions</i> constituted	...	...	25

Tonsil conditions and vision, therefore, make up 51% of the defects of school entrants requiring treatment.

It is apparent that when the Maternity and Child Welfare Department and School Clinic occupy one building, arrangements should be considered for the extension of treatment facilities to children of pre-school age.

Attendance of Parents.

At the medical inspections, 3,308 (60 per cent.) of parents attended out of 5,488 who were invited. For the previous year this percentage was 57. This increase in the interest shown by parents is welcome. With the Infants, 80 per cent. of parents attended; with the Girls, 58 per cent.; and with the Boys, 43 per cent.

The percentage of definite refusal of medical inspection was 1.54, represented by 86 children. The number of children absent on the day of inspection was 658. The percentage of Code Group children actually examined in 1937 was 88.1, a figure only a little below the average attendance.

School Clinic and Branch Clinics.

The erection of the new building for the School and Infant Welfare Clinic is now nearing completion, and it is estimated that the premises will be occupied about Whitsuntide.

The arrangements for treatment and inspection of children at the present School Clinic were carried on as in previous years.

The Branch Clinics for minor conditions at Whitehawk and Moulsecoomb continue to fulfil a useful function in those two districts.

During 1937 the total number of attendances at the School Clinics for all conditions was 30,002 (25,102 being attendances for treatment); these attendances were made by 11,931 children. (For the previous year the total number of attendances was 29,563, made by 11,821 children.)

The following tables gives an analysis of the numbers attending :—

	No. of Children.	No. of Attendances.
Skin Clinic	2461	8315
Eye Clinic (external diseases)	324	916
Ear Clinic	427	2201
Verminous Clinic	625	1465
Inspection Clinic	1628	2295
Tonsils and Adenoids (Pre and Post Operative) and Defective Vision	964	1457
Refraction Clinic	499	971
Employment Cases	194	194
Theatre Licences	34	34
Dental Clinic	4118	9195
Orthopaedic Clinic (School children only)	208	2510
Others (Nutrition, etc.)	449	449
	<hr/> 11931	<hr/> 30002

454 children making 1,126 attendances were dealt with at Moulsecoomb Branch Clinic ; and 500 children with 1,248 attendances at the Whitehawk Branch Clinic.

Inspection Clinic.

Parents bring their children to the School Clinic for consultation, or to see if they are fit to attend school. Many children are also sent by family doctors, by the Head Teachers, or on the advice of the School Attendance Officers. During the year 1,628 individual children were seen, making 2,295 attendances.

Following Up.

No change has been made in our procedure, which has been described in previous reports.

MEDICAL TREATMENT.

1. *Chronic Tonsillitis and Adenoids.*

During 1937, 256 children had operative treatment, the number for the previous year being 205. The total number of children who have received this treatment through the agency of the School Clinic is 6,436.

Normally, children remain in the Sanatorium one night after operation, but if necessary they are kept longer, until fit to be sent home. Conveyance home is by motor ambulance, a School Nurse accompanying them and handing over each child to its parent. On the following day they are visited by the School Nurse to note progress and also to see that the post-operative instructions are being carried out. They are also examined by the Medical Staff eight days after operation, and at Medical Inspection in the Schools. Finally, a year after, they are seen and their condition compared with that previous to operation. In this way a record is kept of the condition of these cases. The results of the examinations indicate that much benefit is derived from the treatment, and this opinion is strengthened by the expressions of satisfaction from the majority of the parents.

Post-operative Examinations.

In 1936, 205 children were operated on, and during 1937 146 of these children came for the "year-after" examination. An analysis of the results show that, amongst other conditions :

Defective hearing was cured or improved in 27 out of 43 who had this symptom, *i.e.*, 62.7 per cent.

Otorrhoea was cured in 18 out of 31, *i.e.*, 58 per cent.

Enuresis was cured in 11 out of 22, *i.e.*, 50 per cent.

It should be noted that these percentages are based on the examination of 146 children out of the 205 operated on, who came for examination.

2. Defective Vision and Squint.

During the year, 499 children attended the Clinic for retinoscopy, making 971 attendances, and 381 had spectacles prescribed.

From an analysis of the 381 prescriptions, the following statistics are obtained :—

Hypermetropic astigmatism ...	...	...	...	145—38.0%
Hypermetropia ("long sight") ...	...	...	...	86—22.6%
Myopia ("short sight") ...	...	...	...	56—14.7%
Myopic astigmatism ...	...	...	...	53—13.9%
Anisometropia ("odd eyes") ...	...	...	...	33— 8.7%
Mixed astigmatism ...	...	...	...	8— 2.1%

Of the above the following had squint :

Convergent : Hypermetropia 41, Hypermetropic astigmatism 32,
Myopia 1, Myopic astigmatism 1.

Divergent : Hypermetropic astigmatism 1, Myopic astigmatism 1,
Anisometropia 1.

The parents of ten children were advised to and sought further advice at the Eye Hospital.

62 children attended for broken lenses, and 173 for renewals.

3. External Eye Disease.

324 children suffering from external eye disease were treated at the Clinic (the number for the previous year being 332), and made 916 attendances. Of these children, 282 were discharged as cured.

The following is an analysis of the cases :

			Cases.	Attendances.	Discharged.
Blepharitis ...	...	...	60	175	51
Conjunctivitis ...	...	...	101	307	86
Other Conditions ...	...	...	163	434	145

4. Ear Diseases.

427 children suffering from ear conditions attended the Clinic for treatment, making 2,201 attendances : of these, 264 were discharged as cured.

The following is an analysis of the cases :

			Cases.	Attendances.	Discharged.
Otorrhoea ...	...	...	202	1751	88
Deafness (Catarrhal) ...	...	...	26	59	19
Other Conditions ...	...	...	199	391	157

The Senior Medical Officer devotes one session per week to aural examination and treatment, and each new case is seen by him. The "dry method" of treatment by "iodine powder," described in previous reports, continues to give good results. 35 cases of chronic aural suppuration were treated by this method and 22 were discharged as cured: 11 other ear conditions were treated and 7 discharged.

5. *Skin Diseases.*

The total number of children treated under this section was 2,461, being 109 more than for last year. This slight increase was due to an increase in the number of cases of septic sores: ringworm still tends to decrease in numbers, the number of cases of ringworm of the scalp being 6, and of the skin being 26; the corresponding figures for last year being 17, and 43.

The following table shows the skin conditions treated during the year:

	Total No. of Children.	Total No. of Attendances.	Total No. of cases discharged.
Ringworm, scalp	6	123	3
„ scalp and skin	—	—	—
„ skin	26	97	23
Impetigo, scalp	49	223	44
„ face	328	1074	297
„ scalp and face	6	18	6
„ other parts	58	144	43
Scabies	109	430	92
Seborrhoea	—	—	—
Eczema	46	184	32
Septic Sores	982	3402	815
Other skin diseases	95	184	72
Other diseases	756	2436	632
Totals	2461	8315	2059

Supervision of Ringworm Contacts.

This has been continued as in previous years, and 2 first cases in families or houses were investigated. None of the three contacts—one of school age—were found to be infected.

6. *Orthopaedic Treatment.*

During the year the number of new cases examined by the Orthopaedic Surgeon was 107: 63 school cases, 37 from the Infant Welfare Department, and 7 from the Tuberculosis Department.

The examinations made by the Surgeon may be summarised as follows:

Number of new cases seen in 1937	...	...	...	107
Number of re-inspections	...	...	...	428

The figures for the different departments are:

School Medical Department.

Number of new cases seen	...	...	...	63
Number of re-inspections	...	...	...	272

Infant Welfare Department.

Number of new cases seen by the Surgeon	...	...	37
Number of re-inspections made by the Surgeon	...	...	68

Tuberculosis Department.

Number of new cases seen by the Surgeon	...	...	7
Number of re-inspections made by the Surgeon	...	...	88

The following is an analysis of the new cases seen during 1937 :

	No. of School Children.	No. of Infant Welfare Children.
1. <i>Congenital Defects.</i>		
Club foot	—	—
Metatarsal varus : hammer toes, etc....	1	10
Dislocation of hip	—	1
Spastic paralysis	—	—
Amyotonia Congenita	—	1
Spina Bifida	—	2
Other conditions	1	2
2. <i>Birth Injuries.</i>		
Nerve injuries	—	2
Fractures	—	—
Torticollis	2	1
Other conditions	—	—
3. <i>Rickety Deformities.</i>		
Bowed tibiae	2	1
Knock-knees, bow legs, intoeing ...	5	5
Other conditions	—	1
4. <i>Knock-knees (non-rickety)</i>	6	8
5. <i>Postural defects of spine ; flat chest</i>	19	—
6. <i>Structural defects of spine ; depressed sternum</i>	2	—
7. <i>Flat-foot ; foot strain ; hallux valgus ; pes cavus (not A.P.M.)</i>	11	—
8. <i>Infantile Paralysis</i>	—	3
9. <i>Sequelae of acute fevers, Septic Arthritis</i> ...	1	—
10. <i>Fractures ; other injuries</i>	1	—
11. <i>Tubercular joints</i>	2	—
12. <i>Other Bone Diseases.</i>		
Epiphysitis of spine	1	—
Perthes disease	2	—
Schlatter's disease	—	—
Apophysitis of os calcis	1	—
Freiberg's Disease	1	—
13. <i>Osteomyelitis</i>	—	—
14. <i>Other conditions, including postural intoeing</i>	3	—
15. <i>Non-orthopaedic conditions</i>	2	—
Total	63	37

The number of treatments given by the Orthopaedic Nurse (massage, etc.), was :—

School Children	...	...	...	...	2510
Infant Welfare Children	...	...	...	...	1025
Tuberculosis cases	...	...	...	...	168
					<hr/> 3703 <hr/>

Discharges.

During the year the Surgeon discharged 48 cases, either as cured or markedly improved, viz. :—

School Children:—

Flat-feet 13 ; Spinal curvature 6 ; Kyphosis 9 ; Knock-knees, etc., 5 ; Infantile paralysis 1 ; Others 9 ; Total, 43.

Infant Welfare Children:—

Irregular toes 3 ; Bow legs 1 ; Others 1 ; Total, 5.

In-patient Treatment of Orthopaedic Cases.

The arrangements for in-patient treatment at the Country Branch of the Royal National Orthopaedic Hospital, Stanmore, and at the Sanatorium, were continued during 1937, and 26 cases were admitted during the year for operative treatment : 11 were school children, 9 were from the Tuberculosis Department, and 6 from the Infant Welfare Clinic.

A report to the Education Committee on the work of the Orthopaedic Clinic, with the results of in-patient treatment of school children for the past 5 years, will be found in the appendix to this Report, on page 37.

Education of Mentally Defective Children.

This is provided for at the " Special " School, Hollingdean Road. The staff consists of the Head Teacher, two assistants, and instructors in boot-repairing and carpentry, and an instructress in housewifery.

The school is certified for 70 children : at the end of the year there were 46 boys and 24 girls on the school roll. The morning sessions are devoted to educational subjects : reading, writing, arithmetic, recitation, singing, and physical training ; the afternoon session to various forms of handwork :—

Boot-repairing—all boys from 12 to 16 years of age receive instruction on three sessions per week. *Carpentry*—three sessions per week. *Gardening*—the male assistant teacher takes this class two afternoons per week, weather permitting. Each boy has a plot, and grows flowers and vegetables. *Football*—The male assistant teacher takes the 12 to 16-year-old boys to the football field at Moulsecoomb on Friday mornings.

For the girls, instruction is given in cookery, laundry, and housewifery on one half-day per week in each subject.

Fire drill was given on frequent occasions during the year. The Senior Medical Officer paid periodic visits : all children were medically inspected and also examined as to their mental attainments. Tribute must be paid to the Head Teacher and the staff for the patience and effort exhibited by them in bringing on most of the children, not only in their educational work but in their developing character and behaviour.

During the year ended 31st December, 18 children were admitted, and 14 left. Of those who left school, 3 girls and 4 boys had attained leaving age, and their names were sent forward to the Mental Deficiency Act Committee ; 5 boys who had been admitted for trial proved ineducable and were notified also ; 2 children left the district.

The school was also visited by the Organiser of Physical Training.

Blind, Deaf, Physically Defective, and Epileptic Children.

The following tables give the number of children falling under the above classifications, maintained in residential institutions by the Education Committee during 1937, and in attendance on the 31st December, 1937 :—

BLIND CHILDREN.				DEAF AND DUMB CHILDREN.		
East Anglian School for Blind, Gorleston.	Court Grange School for Blind, Abbotskerswell.	Barclay Home for Girls.	School for the Blind, Swiss Cottage, N.W.3.	Institution for Deaf and Dumb, Brighton.	Royal School for Deaf and Dumb, Margate.	
Boys.	Boys.	Girls.	Girls.	Boys.	Girls.	Boys.
1	1	2	1	6	5	1

PHYSICALLY DEFECTIVE, ETC.			
Lingfield Epileptic Colony.		Children's Heart Home, Lancing.	
Boys.	Girls.	Boys.	Girls.
1	1	1	1

During the year, having attained the leaving age, children left institutions as follows : 1 boy (School for the Blind, Brighton) ; 1 boy (Heritage Crafts School, Chailey) ; 1 boy (Heart Home, Lancing). One boy and one girl at Lingfield Epileptic Colony were removed, as their mental conditions had deteriorated.

Nursery School.

As from the 1st April, 1937, the Turner Land Open-Air Nursery School, which had been built by the Brighton and Hove (Margaret Macmillan) School Association, and opened in October, 1933, was transferred to the Education Committee.

This Nursery School is run on the system advocated by the Nursery Schools Association. It is situated on an open space in a populous district, and that it supplies a needed want is evident from the fact that its 40 places are filled, and there is a waiting list of 24 children who are not yet 2 years old.

The building consists of a large, bright nursery, basin room, cloakroom, and kitchen. Unfortunately, the accommodation is somewhat inadequate, there being no staff-room, no store-room, and, most important, no isolation room. The latter is a necessity; as in the event of a child developing during the day symptoms of an illness, or infectious condition, at present there are no adequate facilities for isolating the child until the parent comes for it.

The staff consists of the Head Mistress, a Nursery Assistant, and a team of Voluntary Helpers. The Honorary Medical Officer, Dr. Beynon, who has visited regularly since the opening of the school, continues to visit, and renders valuable assistance.

The grounds are extensive, and in the garden are sand-pits, etc., fruit trees, and flowers. From the fruit trees, jam was made last year sufficient for the children's teas for the year.

Children are admitted at the age of 2 and remain till they are 5. They are brought each day at 8.30 a.m., and taken home at 5 p.m. The school is open throughout the year except for 14 days at Christmas, and during Bank Holidays. In the summer, the children are taken to a Babies' Holiday Summer Camp for 12 days.

In school, the children receive milk at 9 a.m., dinner at 12 noon, and tea at 4 p.m. Each child consumes 1 pint of milk per day, and also has a ration of cod liver oil.

The health of the children attending this school has been very good, and they have been remarkably free from infectious disease, there being only three cases of chicken pox during the year.

Particular attention is paid to the personal cleanliness of the children, and the parents have responded well. There was only one case of exclusion for head vermin.

The Senior School Nurse visits the school regularly. A medical inspection was carried out by the Lady Assistant School Medical Officer; the general health of the children was very good, and the nutrition standard was high; the only defects were one case of slight impetigo, and one of enuresis.

In school the children are extremely happy and bright, and very industrious at their important "tasks."

Nursery Classes.

The policy of the Committee is to provide nursery classes in all new schools. At present, nursery classes are established at Sussex Street, Lewes Road, and Park Street Schools; accommodation is also provided at Whitehawk and Patcham Schools; and at St. John's C. of E. School a class is contemplated.

School Nurses.

The visiting of schools was carried out as in previous years. During the year the nurses made 62,142 examinations.

The number of visits made by the School Nurses to school departments was 379. 705 home visits were also made for following up, etc.

The following table shows the result of their visits to the schools :—

			No. of Individual Children found infected.	No. of Examinations made of infected Children.
Verminous	condition	of		
head and body	...	...	1480	5150
Ringworm	...	...	10	25
Impetigo	...	...	176	333
Scabies	...	...	12	30
Other conditions	...	...	107	274
			<hr/> 1785 <hr/>	<hr/> 5812 <hr/>

Of the 1,480 children found unsatisfactory, 625 warranted exclusion from school : for the previous year 722 were excluded.

The children excluded—625—attended the Clinic, making 1,465 attendances.

Prosecutions under Attendance Bye-Laws.

During 1937, 5 parents were prosecuted. Four cases were withdrawn after adjournment and one dismissed.

Milk Clubs.

There is now a Milk Club in every Elementary School Department. Advantage is taken of the Milk Marketing Board's Scheme, whereby one-third of a pint of milk is supplied at a cost of one halfpenny.

Meals and Milk for Necessitous Children.

As in previous years, the Education Committee took advantage of the canteens at Southover Street and at Whitehawk, where meals are prepared by a voluntary Committee, and necessitous children are supplied with dinners. These canteens were open from November, 1936, till Easter, 1937, and the children who had had dinners were then transferred to the milk list.

In September of this year a list of 1,025 necessitous children, recommended by Head Teachers, was received. These children were examined by the School Medical Staff, as to malnutrition, and 943 were recommended to receive additional nourishment—133 for dinners and 810 for milk, and of those recommended for milk, 20 were marked to have one-third of a pint both morning and afternoon. In making these recommendations regard was paid to the suggestions contained in Circular 1437 of the Board of Education where—*enter alia*—it is recommended that children should be selected who show symptoms of subnormal nutrition, however slight.

The following figures, kindly supplied by the Head of the Children's Care Department, relate to the period 1st January to the 31st December, 1937 :—

7,390 Dinners supplied at 4d. or 5d. each	...	...	£119	4	7
107,902 one-third pints of milk supplied at $\frac{1}{2}$ d.	...	...	£224	15	11
Number of children on feeding list on the 31st December, 1937	...	...	...	...	744.

On the 31st December, 1937, 234 of the children recommended by the Senior Medical Officer for milk, and whose parents were in a position to pay the full cost, had joined the school clubs and are not included in these figures. The corresponding number for the previous year was 407. The supply of milk was continued throughout the year.

Nutrition of Children.

This question was gone into fully in last year's Report, and the procedure for the ascertainment of children with nutritional conditions was described.

During the year under review the nutrition of the children has been kept well to the front ; the general standard of nutrition is good.

Employment of Children.

We are indebted to the Education Officer for the following extracts from his Report to the Education Committee, on the Employment of Children for the year ending 31st December, 1937 :—

(1) Children coming within the Provisions of the Employment of Children Bye-Laws.

The new bye-laws governing the employment of school children made under the Children and Young Persons Act, 1933, have now been in operation since the 1st December, 1934. These bye-laws prohibit the employment of a child under the age of 12 years and place restrictions on the employment of children from that age until they reach school-leaving age, that is, until the end of the term in which they become 14. They are permitted to work only during certain specified hours, which are as follows :—

School Days.

For a period of two hours between 5 and 8 p.m.

A child who has attained the age of 13 may be employed before school between 7 a.m. and 8 a.m. in the delivery of milk, newspapers, or in light household duties, and after school for not more than one hour between 5.30 p.m. and 7.30 p.m.

Saturdays and School Holidays.

For not more than four hours between 7 a.m. and 1 p.m. and 5 and 8 p.m.

Sundays.

For not more than two hours between 7.30 and 10 a.m. in the delivery of milk, newspapers, or in light household duties.

Employers are required to notify the employment of a child within four days after the employment begins and, provided the particulars of the employment do not conflict with the provisions of the bye-laws, an Employment Card to be carried by the child when working, and an Employer's Card to be exhibited in the place of employment, are issued.

The town continues to be regularly patrolled, and the co-operation of the Police in reporting contraventions is most helpful and appreciated.

During the year the Committee considered five reports submitted by the Chief Constable and one report from the Factory Inspector regarding a 12-year-old boy employed in a wood-chopping factory.

In regard to contraventions of the bye-laws, 15 summonses were heard by the Magistrates during 1937. This is the most ever ordered in any one year. The summonses were against 8 newsagents, 3 greengrocers, 2 milkmen, 1 confectioner, and 1 coal merchant.

The number of employers using child labour during the year was 373. Comparative figures for the four previous years are :—

1936	...	...	361
1935	...	...	363
1934	...	...	341
1933	...	...	315

Head Teachers are asked to send in at the beginning of each term lists of children who are employed in any way, and the table below gives the number reported during the year, with comparative figures for the past five years :—

	Total number reported employed during 1937.	Total number reported employed.			
		1936	1935	1934	1933
Boys	628	591	583	566	534
Girls	11	13	14	13	20
Totals	639	604	597	579	554

Children who are employed before morning school are required to be examined by the School Doctor to show that they are physically fit to undertake work at such a time. The following shows the number of children working in the early mornings and on Sundays :—

YEAR.	EMPLOYMENT BEFORE SCHOOL.				SUNDAY EMPLOYMENT.			
	No. Registered during the year.		No. Working at end of year.		No. Registered during the year.		No. working at end of year.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
1937	189	—	97	—	176	1	97	—
1936	171	1	81	1	162	—	78	—
1935	164	1	75	1	155	1	73	1
1934	168	—	75	—	164	—	74	—
1933	188	—	92	—	175	1	89	—

The following is an analysis of the total number of children registered during 1937 and the occupations in which they were employed :—

	Number registered during 1937.			Comparative Figures for 1936.		
	Boys.	Girls.	Total.	Boys.	Girls.	Total.
Number of Employment Cards issued	570	8	578	519	9	528
Number of Employment Cards surrendered	543	12	555	531	6	537
Number of Cards in circulation at end of year	346	5	351	319	9	328
Number of <i>children</i> in possession of Cards at end of year	332	5	337	314	9	323

OCCUPATIONS.	NO. REGISTERED DURING 1937.			COMPARATIVE FIGURES FOR 1936.		
	Boys.	Girls.	Total.	Boys.	Girls.	Total.
Newspaper delivery	285	—	285	257	2	259
Greengrocery delivery	120	—	120	112	3	115
Meat delivery	61	—	61	55	—	55
Bread delivery	18	—	18	27	—	27
Milk delivery	6	—	6	2	—	2
Household duties	—	4	4	1	3	4
Other employment	80	4	84	65	1	66
Totals	570	8	578	519	9	528

(2) *Children Employed in Entertainments.*

During 1937, 33 licences to enable children to take part in entertainments were issued as against 83 in 1936. No licences were issued to enable children to perform in Christmas (1937) pantomimes, 20 being granted in 1936 for Christmas shows.

Thirty-six children, as compared with 30 in 1936, visited Brighton during the year to perform at local theatres; 15 of them were licensed by the London County Council.

The lodgings of the children and the dressing-rooms at the theatres are always visited before their arrival, and frequent inspections are made at the theatres during the time the children are performing. I think that the Committee can rest satisfied with the conditions under which visiting children performing in Brighton places of entertainment live and carry on their work.

While on tour, children, as a rule, attend one of the Public Elementary Schools, a resumé of the work done being entered in their record books for the information of the next following teacher.

Juvenile Employment.

Close co-operation between the Juvenile Employment Bureau and the School Medical Department has been maintained. It has been the custom here for many years now for the Senior Medical Officer to submit to the Juvenile Employment Officer, at the end of each School-term, medical reports and suggestions for suitable employment, on children who present abnormalities, defects, etc., these reports being based on the latest medical records of the individual child as recorded at Medical Inspection, or more often, as seen at special examinations at the School Clinic.

During the past year special reports and suggestions *re* suitable employment respecting special children were submitted in the case of 53 boys and 58 girls.

Co-operation with Head Teachers.

Much of the success of school medical work depends on the assistance and co-operation with the Head Teachers and their Staffs, and we should like to record here our appreciation of the great assistance rendered by them so willingly.

INFECTIOUS DISEASES.

No schools had to be closed on account of infectious disease.

Eighty children contacts with diphtheria in their own homes were swabbed before their return to school; of these, 9, or 11·25 per cent., gave positive results. 75 recovered diphtheria patients were similarly swabbed immediately before the date fixed for their return to school, and 7 (9·3 per cent.) gave positive results. The number of cases of diphtheria notified in 1937 was 86, as compared with 106 in 1936.

DENTAL REPORT FOR THE YEAR 1937.*Dental Staff.*

The work of the department was carried out by three full-time dental surgeons and two clerk attendants. There were no changes in the staff during the year.

Extent of the Service.

The Dental Service operates under the direction of the Education Committee and the Health Committee. The dentists are employed for five-sixths of their time on the inspection and treatment of children in attendance at the Intermediate and Elementary schools; the remainder of their time is spent on the inspection and treatment of patients referred from the Maternity and Child Welfare Centres, and in the treatment of patients at the Borough Sanatorium.

The school service employs the equivalent of two full-time dentists and one half-time dentist.

Inspection and Treatment.

Inspections are carried out in the schools and a simple system of charting is used which records abnormalities and pathological observations, in addition to the approximate number of fillings and extractions required. Such charting is intended only as a clear indication of the treatment required rather than an exact definition of the treatment necessary. A thorough examination is carried out in the schools for the children whose dentitions are apparently sound, and a more detailed inspection is done for children in the defective group when they come for treatment. All treatment is carried out at the Central Clinic. Infants and Mothers referred from the Maternity and Child Welfare Centres are seen on special afternoon sessions.

United Dental Service.

The School Service works in close conjunction with the Maternity and Child Welfare Scheme, and these closely related systems undoubtedly provide one of the most effective forms of dental education.

The Pre-School Child.

In the pre-school section of the Welfare Service, 286 children attended and 149 received treatment. The remaining 137 were inspected twice during the year as members of the " Toddler Clinic " group. These infants are seen at about the time of eruption of the first tooth, and the parent returns with the child at regular intervals for inspection and advice. Any small defects found in the teeth of these infants are detected at an early stage and remedied without discomfort to the patient. The use of the " Comforter " is discouraged and thumb and finger-sucking checked. Many parents do not realise that the developing bones of the mouth are soft and easily deformed, but once they appreciate this fact they show commendable enthusiasm in carrying out their part in this work of prevention.

Scholarship Children.

All children awarded special places at the Secondary Schools received dental appointments, as in previous years, irrespective of the routine inspections. 92 of these children made 165 attendances for treatment. The following table gives a summary of the work done for this group :—

Teeth.	Fillings.	Extractions.	Other Operations.	Administration of N20.
Temporary ...	—	60	1	—
Permanent ...	132	34	24	3
TOTAL ...	132	94	25	3

Other Operations.

This heading in the above table and in the statistical table on page 36, includes the following procedures : Simple dressings for the relief of pain, scalings, gum treatment, " Regional " or " Block " Anaesthesia, X-Ray work for diagnostic purposes, extirpation of nerves, treatment and filling of root canals, silver nitrate-formalin treatment to prevent extension of decay, and the fitting of orthodontic appliances for the correction of irregularity of the teeth.

Anaesthesia.

The term "Regional" or "Block" anaesthesia included under the heading of "Other Operations" may be explained briefly as a method of rendering an area free of sensation by the injection of a solution into the soft tissues around the main nerves supplying the part concerned. Extensive use has been made of this method in both conservative and extraction work in order to reduce pain or discomfort to a minimum. The needle puncture is practically painless, and the anaesthesia produced is profound. The School Dental Officer has an added responsibility because the great majority of children receive their first dental attention from him, and these efforts to achieve "painless dentistry" are therefore of the utmost importance. The ultimate attitude of the adult population towards dental treatment may well depend on the memories retained of childhood visits to the school clinics.

Evaluation of Statistical Returns.

The "Points Scheme" explained in last year's report was continued during the present year and proved invaluable as an administrative aid. Different operations are graded and allotted a certain number of points according to the average time involved in carrying out the work concerned. The number of fillings and extractions is disregarded, and the dentist is encouraged, in the interests of the patient, to consider the quality of his work rather than the number of fillings he can do in a day. During the year the number of individual points earned by three dentists differed (between the highest total and the lowest total number) by only 1.9 per cent.

Orthodontic Treatment.

During the year 96 cases of irregularity of the teeth were treated by the judicious extraction of teeth in overcrowded mouths; 22 temporary teeth and 97 permanent teeth were removed in order to regulate the remaining teeth and improve the appearance and masticatory powers of the children concerned. In addition, 17 deformities requiring the use of apparatus were accepted for treatment and 20 appliances were fitted to correct the irregular teeth in the mouths of these children. Simple inexpensive removable plates were used for all the cases.

Routine Inspection and Treatment.

Routine inspection was suspended at the beginning of the year as 1,037 children inspected during 1936 were awaiting treatment. These children were treated in 1937.

The complete round of the schools for inspection and treatment covers a period of about two and a half years. This interval continues to show a tendency to increase, and since inspections were again restricted to children in the Infants' and Junior Mixed Departments and the final age groups in the Senior Departments, this increase is to be deprecated.

The Chief Medical Officer of the Board of Education, in his Annual Report for the year 1935, makes several important comments with reference to this matter. The following extracts are of particular interest :—

"Authorities should aim at securing an initial dental inspection of every child on its entry into school life, to be followed by an annual re-examination until the child ceases to attend school."

"In any individual area where appreciation of the service has grown to such an extent as to render it impossible for the dental staff to provide annual inspection and treatment of all the children, the Board are anxious that the staff should be increased to keep pace with the demand."

The full significance of these brief extracts becomes apparent when a comparison is made of the figures concerning the prevalence of decay for the present year with the corresponding figures of ten years ago, when an annual inspection was available.

During the present year 88·8 per cent. of the total number of children examined showed evidence of dental defects requiring treatment. This shows a slight advance on the figure for last year (85·2 per cent.), but a tremendous increase compared to the corresponding figure for the year 1927, when the number found to require treatment was 46 per cent.

Re-inspection, which is not frequent enough, involves waste of time in a way which is not obvious; fresh caries may develop, fillings may become faulty and filled teeth may become infected from septic deciduous teeth; the control of dental disease is indeed rendered more difficult.

The demand for dental treatment has shown a gradual increase year by year in comparative relationship to the public appreciation of this service which clearly benefits the recipients. It is hoped that it may be possible in the near future, with increased accommodation available, for children in all departments to have once again the benefit of an annual inspection with treatment if necessary.

Acceptance of Treatment.

The parents of 78·2 per cent. of the children found to have defective teeth at the routine inspections accepted the offer of treatment. The figure compares favourably with that of last year (74·7 per cent.). The acceptance figures varied in the different districts visited from 96·9 per cent. to 52·3 per cent.

The corrective measures introduced some years ago remain in force and have resulted in a steady increase in the number accepting treatment. It was wasteful to keep on inspecting and offering treatment year after year to those who had no intention of accepting treatment. All cards of children whose parents definitely refuse the offer of treatment, and cards of other children, whose parents, although accepting in the first instance, disregard subsequent appointments, are placed in the defaulter group. Parents who refuse preventive treatment for their children deprive these children of the chance of availing themselves of emergency treatment later. If, however, they show a change of attitude with regard to the advisability of routine treatment, the children are seen again when the next inspection is carried out at their school. This allows for a change of mind on the part of the parent and enables those who appreciate the value of preventive treatment to have their treatment completed at an earlier date.

Treatment is in no case refused simply because the offer has on a former occasion been rejected by parent or guardian. Defaulters are withdrawn from the scheme solely because the dentists are able to treat only a certain number of children. The children who benefit most are those who have regular routine inspection and consistently accept the offer of treatment.

Attendances for Treatment.

9,195 attendances were made by 4,118 children for treatment. 89·1 per cent. of the routine cases, whose parents consented on the acceptance forms to have the children treated, actually received treatment.

Acknowledgment.

The measure of success attained by the scheme is largely due to the support so freely given by the members of the teaching profession, and it is a pleasure to record once again our gratitude to them for their ready and active co-operation.

Treatment Tables.

The following table shows the number of different operations carried out during the year, the figures for last year being given in order that a comparison may be made :—

	Number of Children Inspected.	Number Requiring Treatment.	Number Actually Treated.	Fillings.	Extrac- tions.	Adminis- trations of N20.	Other opera- tions.
1936	6113	5212	4101	5079	9457	457	1391
1937	5038	4457	4118	5197	8846	505	1567

The Statistical Table (Table IV., Group V.) in which all the above figures for the present year are included, is set out on page 36.

PHYSICAL TRAINING.

We desire to thank the Organisers of Physical Training for the following extracts from their Reports to the Committee, for 1937 :—

I. "*Keep Fit*" Work.

The past two years have, for Brighton as for the rest of the country, been eventful in the history of physical education.

Physical training in the schools has long been established, but it was not until 1936 that any nation-wide attempt was made to arouse interest in the subject among grown-ups. During that year a great deal of pioneer work was done by the physical training associations and the Central Council, and it was largely due to their efforts that the "*Keep Fit*" movement was well under way before the passing of the Physical Training and Recreation Act.

In Brighton, much has been done by the Continuation Schools' Committee to popularise the movement. In 1936, a good beginning was made with gymnastics and "*Keep Fit*" work, and among the classes held in that year were two for leaders in juvenile organisations. During the past year, sixteen classes were formed. Of those, seven were for women, five for men, including a class of 35 students at the Technical College, one for girls, one for boys, and two under the regulations of the Ministry of Labour for unemployed boys and girls. A "*Keep Fit*" class for teachers and anyone interested in leadership was perhaps the most successful on the women's side. The roll was over 70.

Apart from these classes, a good deal of voluntary work has been done by several members of the Evening School staff in organising clubs for football, cricket, swimming, rambling, and camping.

Years ago, the Committee instituted classes in Country Dancing and conducted them until the members were sufficiently numerous to form a local branch of the English Folk Dance Society. This branch still carries on the work successfully without any call on public money. Among other bodies doing good work in the cause of physical education are the Women's League of Health and Beauty and the various organisations affiliated to the Juvenile Welfare Council. In the latter organisations, the membership is over 5,000, and of that number roughly two-thirds take part in some form of physical activity.

It need hardly be said that in a town with a population of over 147,000 the present arrangements touch only the fringe of the possibilities, but there is every reason to believe that with continued encouragement from the Authority, the "Keep Fit" movement will grow.

A glance at the Official Handbook will show that generous provision has been made by the Corporation and the various sports clubs for the recreative side of physical training. Among the facilities under municipal control are the Hollingbury Golf Course, nearly 100 tennis courts, 3 swimming pools, 28 football pitches, 22 cricket pitches, and 20 bowling greens.

Physical Exercises in the Schools.

There has been no falling off in the keenness for physical exercises in the schools and, although various circumstances have hampered progress in a number of classes, the quality of the work in most of them has shown a considerable improvement. Much more attention has been given to posture, lessons have been more vigorous, and more care has been taken in preparing them to ensure the continuity necessary to retain the interest of the children and complete the table in the allotted time.

Miss Knight's report on the work in the Senior Girls' departments is attached.

In a good number of our older schools, physical training has long been hampered owing to lack of indoor accommodation, and it is a matter for regret that in two of our newest infants' departments no hall has been provided.

Shoes.

Towards the end of September the Committee provided gymnastic shoes for all children in the elementary schools. The importance of this step as far as most of the schools are concerned cannot well be over-estimated, as unsuitable shoes have always been the biggest handicap to physical training.

During the coming year, gymnastic clothing will be supplied by the Committee, as an experiment, to two senior departments.

Organised Games in the Parks.

Arrangements were made as usual for all senior children and the upper class in the junior mixed departments to attend the parks for organised games.

In last year's report a plea was made for more group work under competent leaders during part of the games period, as it was felt that the custom in some schools of devoting the whole of the time to match play, particularly in cricket and stoolball, gave the children very few opportunities for practice. During the past year there has been a considerable increase in the number of lessons organised on this principle, and it is hoped that it will be adopted throughout the schools so that all the children can be profitably employed during their brief visits to the parks.

Swimming.

For a good many years swimming has been perhaps the most popular branch of physical training and, as the following results will show, enthusiasm has not abated.

1,225 passed the ten yards test and 954 passed the twenty-five yards test.

The first total is a little higher than last year and the latter a little lower.

Arrangements for the more advanced swimming tests at North Road Baths were made as usual by the Elementary Schools' Swimming Association and the Intermediate Boys' and Girls' Schools. The results for the season are given below:—

<i>Elementary Schools Swimming Association.</i>	<i>Juniors.</i>		<i>Seniors.</i>	
	Boys.	Girls.	Boys.	Girls.
50 yards	99	200	—	—
100 yards	—	—	195	225
<i>Intermediate Schools.</i>				
	Boys.		Girls.	
50 yards	—		26	
100 yards	29		39	
440 yards	20		37	

Life Saving (Boys).

Intermediate Certificate	...	...	...	9.
Bronze Medallion	...	...	...	7.

Practically all the above totals are higher than those of the preceding year.

Nine proficiency tickets giving free admission to North Road Bath were awarded to each of these children by the Committee during the season.

The decision of the Committee to install a filter plant at St. Luke's Terrace Bath was received with a great deal of satisfaction by everyone concerned with swimming as it had become impossible to keep the water clean by emptying and filling twice a week.

Mechanically, the plant was very satisfactory, but as the water tended to become a little muddy during the busy part of the season, there was some reason to doubt whether the contractors in tendering for the plant had allowed for a weekly attendance of approximately 1,600 bathers. A turnover of five hours would have been more satisfactory than the actual six to six and a half hours.

It is pleasing to report, however, that there has been a substantial drop in the running costs at the bath since the plant was installed.

The following details of expenditure during the past two years will no doubt be of interest :—

1936.	£	s.	d.	1937.	£	s.	d.
Water (1,394,900 gals.)	57	17	5	Water (143,900 gals.)	10	0	0
Fuel (18 tons)	38	0	0	Fuel (10 tons)	20	12	6
Electricity (Light)	1	11	7	Electricity (Light)	1	2	4
Wages	37	11	8	„ (Power)	10	0	0
Cleaning Materials	5	16	1	Wages	37	3	9
				Cleaning materials	5	0	0
				Chemicals	5	0	0
TOTAL COST	£140	16	9	TOTAL COST	£88	18	7

£140 was paid to the Baths and Markets Committee for the :—

- exclusive use of North Road Bath on Friday from 8 a.m. until 1 p.m. and from 2 until 5 p.m., and on Monday, Tuesday, Wednesday, and Thursday mornings.
- exclusive use of Rottingdean Pool on Tuesdays from 9 until 10 a.m.
- use of attendants as necessary.
- up to 7,000 admissions by proficiency tickets. (The actual number of proficiency tickets used was 5,533.)

(Signed) J. R. WATTERS,

Organiser of Physical Training.

II.—I beg to submit my report on the Senior Girls' Schools for the year ending 31st December, 1937 :—

The sixty days which I have spent working in Brighton during this first year of my appointment have of necessity been a period of discovery and investigation. I have been deeply appreciative of the friendly welcome I have received in every school, and it has been gratifying to find a keen interest in the many aspects of Physical Education. This, together with the high standard shown in the lessons in the Senior Girls' Schools, which have claimed my particular attention has, I feel, given me a happy relationship everywhere and the opportunity of working under most pleasurable conditions.

The Physical Training Lesson.

On the whole the lessons have been well organised and prepared thoroughly ; the teachers have a good understanding of movement and the ability to obtain it from a class. They have tackled with zest and determination the problems of posture and footwork, and many of them are now finding an unmistakable improvement as the result of their efforts, which have been assisted by the Committee's provision in the last term of plimsolls for every child.

In all schools except two there is a hall available, where at least some lessons can be taken when out-of-door work is impossible, and this makes for the maintenance of a good standard. When there is no hall, it is to be recommended that, despite inevitable difficulties, a suitably adapted lesson should be taken in the classroom. There are many positions and movements which to be of the greatest benefit need detailed teaching and correction, but in the playground in cold or damp weather the children must be kept warm, with the result that finer points of accuracy must often be sacrificed as the lesser evil. In this way the classroom lesson can be most useful as a supplement to the out-door lesson, which should form its basis, and particular attention can then be given to these movements. At the same time, every opportunity must be taken to give the children the maximum amount of activity when throughout the day the outlet for their energy is very limited.

The Equipment of Swedish Apparatus.

In the latter months of 1936 every school with suitable accommodation was provided with six benches, four mats, and a vaulting box, but until the beginning of 1937 this apparatus was only used by those teachers who were already qualified to do so.

Teachers' Class.

From February to May practically all those responsible for Physical Training attended a course of twelve lessons in Park Street Senior Girls' School. It was mainly an introduction to the use of the apparatus, but provision was also made for teachers without any who needed more advanced work than that given in the 1933 Syllabus. All teachers received copies of the scheme, together with detailed explanation of how to use it. Forty-three Brighton teachers attended, with an average attendance of 71 per cent. The spontaneity and enthusiasm made the class a joy to take, and they are to be congratulated on their intelligent and careful application of the work.

Dress.

In all schools the value is realised of light and little clothing, and the girls nearly always come to their lessons suitably clad. In some schools they remove unnecessary garments and work in dark knickers with a blouse or jersey, while in a few the more ambitious task has been undertaken of trying to equip the children with a definite outfit either in the form of a simple tunic or shorts, which are made in the school. The time and energy which have been spent by the teachers concerned, and their co-operation with the needlework department, calls for much admiration. The problem of regular laundering presents difficulties which I should like to discuss more fully with the teachers in the near future.

Organised Games.

The good facilities available at the fields demand that they should be put to the most profitable use. It is important that every girl should know beforehand all details affecting herself so that no time is wasted at the field over apparatus or position in the games. The preliminary practices, as well as warming the children at the outset, give them opportunity for concentrated handling of the apparatus and thus form the key to continuous improvement. Their value is augmented when use is made of reliable and efficient team leaders, and a little time spent in helping these girls to take charge of their groups is of the greatest assistance, and the teacher can be left free more easily to help each group for a short time. In the major games, coaching is evident which can only be the outcome of a sound understanding and a real appreciation of the finer points of play, together with much interest and enthusiasm on the part of the teacher. In the few cases where one or other is in some degree lacking, there is a marked drop in the standard of play, which often goes with a certain lack of keenness and unwillingness among the children to remove out-door clothes.

It was interesting to attend one or two sports days during the summer. These can be enjoyable functions when the organisation is slick and the competition keen, and are a valuable aspect of Physical Training well worth the time and trouble they involve.

Swimming.

The standard of swimming and coaching generally is high, and the teachers give their time and energy most generously both before and after school hours. The children seem keen and anxious to improve, and this speaks well for the confidence inspired by sympathetic encouragement. Good style figures in the actual teaching, but children with a poor stroke sometimes appear to be allowed to go too long uncorrected. It would be good to see all tests even more dependent on good style.

I should like to take this opportunity of expressing my gratitude to Mr. Watters for the generous way in which he gave his time to initiating me into my work in Brighton, and for his untiring and invaluable help in every direction throughout the year.

(Signed) JOAN BURNETT KNIGHT,

Organiser of Physical Training.

SECONDARY SCHOOLS.

Routine medical inspection was carried out in the Municipal Secondary Boys' and Girls' Schools at Varndean as in previous years.

The number of pupils in attendance is : Boys' School, 556 ; Girls' School, 464.

At the medical inspection, 205 Boys and 156 Girls were given a full medical inspection, *i.e.*, 35·4 per cent. of the Secondary pupils were seen. The number of "Special" cases was 6, and the number of Re-inspections was 171—80 Boys and 91 Girls.

The following table gives the numbers inspected in the various age groups :—

Year of Birth.	1921.	1922.	1923.	1924.	1925.	1926.	1927.	Total.
Age.	16	15	14	13	12	11	10	
Boys ...	3	106	12	7	15	53	9	205
Girls ...	1	54	14	3	7	72	5	156
Totals ...	4	160	26	10	22	125	14	361

	Special Cases.	Re-examinations.	Grand Total.
Boys ...	2	80	82
Girls ...	4	91	95
Totals...	6	171	177

Return of Defects found at Medical Inspection in the year ended 31st Dec., 1937.

DEFECT OR DISEASE.						ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
						No. OF DEFECTS.		No. OF DEFECTS.	
						Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.
(1)						(2)	(3)	(4)	(5)
SKIN	...	Ringworm	...	...	...	—	—	—	—
		Impetigo	...	...	...	—	—	—	—
		Other Diseases (Non-Tuberculous)	...	...	...	—	2	—	—
EYE	...	Defective vision (excluding squint)	...	...	...	20	2	2	—
		Squint	...	...	...	1	—	—	—
		Other conditions	...	...	...	7	—	3	—
EAR	...	Defective Hearing	...	...	...	1	—	—	—
		Otorrhoea	...	...	...	1	—	—	—
		Other conditions	...	...	...	5	—	—	—
NOSE AND THROAT	{	Tonsils and Adenoids	...	...	...	—	—	—	—
		Enlarged Tonsils only	...	...	...	1	—	—	—
		Adenoids	...	...	...	—	—	—	—
		Other conditions	...	...	...	—	1	—	—
Defective Speech						—	—	—	—
Enlarged Cervical Glands (Non-Tuberculous)						—	—	—	—
Heart AND CIRC.	{	Heart disease—	...	...	...	—	—	—	—
		Organic	...	...	...	—	—	—	—
		Functional	...	...	...	—	1	—	—
NERVOUS SYSTEM	{	Anaemia	...	...	...	—	—	—	—
		Epilepsy	...	...	...	—	—	—	—
		Other conditions	...	...	...	—	—	—	—
DEFORM-ITIES	{	Kyphosis	...	...	...	—	23	—	—
		Scoliosis	...	...	...	—	—	—	—
		Other conditions	...	...	...	—	9	—	—
Other Defects and Diseases						—	27	—	—

Return of Defects treated during the year ended 31st December, 1937.

Defective Vision and Squint :—

Defect or Disease.	No. OF DEFECTS DEALT WITH.			
	Under the Authority's scheme.	Submitted to refraction by private practitioner, or at hospital, apart from the Authority's scheme.	Otherwise.	Total.
Errors of refraction (including Squint) ...	28	—	—	28

Total number for whom spectacles were prescribed :—

(a) Under the Authority's scheme	...	...	...	26
(b) Otherwise	...	...	...	—

Total number who obtained or received spectacles :—

(a) Under the Authority's scheme	...	...	...	25
(b) Otherwise	...	...	...	1

The following table gives in statistical form the findings of Medical Inspection :—

	Boys.		Girls.	
	Rou-	Per-	Rou-	Per-
	tine.	cent-	tine.	cent-
No. inspected	205	36·8	156	33·6
No. defective requiring treatment	22	10·7	13	8·3

Classification of the Nutrition of the Pupils inspected during the year at the Routine Inspection.

Boys.

AGE.	16	15	14	13	12	11	10	TOTAL.
A.	3	76	7	6	12	41	8	153
B.	—	25	4	—	3	9	1	42
C.	—	5	1	1	—	3	—	10
Totals :	3	106	12	7	15	53	9	205

Girls.

AGE.	16	15	14	13	12	11	10	TOTAL.
A.	—	34	11	3	5	41	2	96
B.	1	17	2	—	2	27	2	51
C.	—	3	1	—	—	4	1	9
Totals :	1	54	14	3	7	72	5	156

TOTALS.

	A.	%	B.	%	C.	%	TOTAL.
Boys	153	74·6	42	20·5	10	4·9	205
Girls	96	61·5	51	32·7	9	5·8	156
TOTAL	249	68·9	93	25·8	19	5·3	361

A.—Excellent. B.—Normal. C.—Slightly sub-normal.

ELEMENTARY SCHOOLS.

TABLE I.

A.—Routine Medical Inspections.

Number of Inspections in the prescribed Groups :—

Entrants	...	...	...	...	...	...	...	1821
Second Age Group	...	...	...	...	...	...	...	1735
Third Age Group	...	...	...	...	...	...	...	1627
Total	...	...	...	...	...	...	...	5183
Number of other Routine Inspections	...	...	...	...	...	...	...	305
Grand Total	...	...	...	...	...	...	...	5488

B.—Other Inspections.

Number of Special Inspections	...	...	...	...	...	...	...	1415
Number of Re-Inspections	...	...	...	...	...	...	...	3284
Total	...	...	...	...	...	...	...	4699

C.—Children Found to Require Treatment.

Group. (1)	For defective vision (excluding squint) (2)	For all other conditions recorded in Table II. A. (3)	Total. (4)
Entrants	3	240	243
Second Age Group	127	124	248
Third Age Group	51	108	154
Total (Prescribed Groups) ...	181	472	645
Other Routine Inspections ...	15	25	38
Grand Total	196	497	683

*A.—Return of Defects found by Medical Inspection
in the year ended 31st December, 1937.*

DEFECT OR DISEASE.				ENTRANTS.		TOTAL INSPECTIONS.			
				No. of Defects.		ROUTINE.		SPECIAL.	
				Requiring Treatment.	To be kept under observation, but not requiring Treatment.	No. of Defects.		No. of Defects.	
						Requiring Treatment.	To be kept under observation, but not requiring Treatment.	Requiring Treatment.	To be kept under observation, but not requiring Treatment.
SKIN	{	(1) Ringworm—Scalp ...	—	—	1	—	—	—	
		(2) „ Body ...	—	—	—	—	1	—	
		(3) Scabies ...	9	—	11	1	1	—	
{	(4) Impetigo ...	1	—	9	—	1	—		
	(5) Other Diseases (Non-Tuberculous) ...	15	3	33	6	4	—		
	TOTAL (Heads 1 to 5)			25	3	54	7	7	—
EYE	{	(6) Blepharitis ...	6	—	19	—	1	—	
		(7) Conjunctivitis ...	1	—	3	—	—	—	
		(8) Keratitis ...	—	—	—	—	—	—	
{	(9) Corneal Opacities ...	1	—	2	—	1	—		
	(10) Other Conditions (excluding Defective Vision and Squint)	1	2	22	4	130	30		
	TOTAL (Heads 6 to 10) ...			9	2	46	4	132	30
EAR	{	(11) Defective Vision (excluding squint) ...	3	8	196	53	87	—	
		(12) Squint ...	29	3	31	8	33	1	
		(13) Defective Hearing ...	—	2	8	2	1	—	
{	(14) Otitis Media ...	6	—	18	—	1	—		
	(15) Other Ear Diseases ...	12	—	36	—	6	—		
	(16) Chronic Tonsillitis only	34	22	67	36	122	57		
NOSE AND THROAT	{	(17) Adenoids only ...	2	2	13	6	6	2	
		(18) Chronic Tonsillitis and Adenoids ...	69	5	92	10	74	7	
		(19) Other Conditions ...	4	33	7	89	19	59	
(20) Enlarged Cervical Glands (Non-Tuberculous) ...			1	—	4	—	15	34	
(21) Defective Speech ...			1	2	1	12	—	—	
HEART & CIRCULATION	{	Heart Disease :							
		(22) Organic ...	—	7	—	33	5	47	
		(23) Functional ...	—	11	—	29	1	8	
{	(24) Anaemia ...	—	2	2	8	1	11		
	(25) Bronchitis ...	6	9	5	11	8	7		
	(26) Other Non-Tuberculous Diseases ...	1	—	2	2	15	54		
TUBERCULOSIS	{	Pulmonary :							
		(27) Definite ...	—	—	—	1	—	—	
		(28) Suspected ...	—	—	—	—	—	—	
{	Non-Pulmonary :								
	(29) Glands ...	—	1	—	3	—	—		
	(30) Bones and Joints ...	1	—	1	2	—	—		
{	(31) Skin ...	—	—	—	—	—	—		
	(32) Other Forms ...	1	—	1	—	3	1		
	TOTAL (Heads 29 to 32) ...			2	1	2	5	3	1
NERVOUS SYSTEM	{	(33) Epilepsy ...	3	—	7	—	—	—	
		(34) Chorea ...	1	—	5	1	7	10	
		(35) Other Conditions ...	6	10	13	26	7	4	
DEFORMITIES	{	(36) Rickets ...	4	—	7	1	1	—	
		(37) Spinal Curvature ...	—	1	7	9	2	—	
		(38) Other Forms ...	25	25	59	259	19	7	
(39) Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) ...			17	18	44	61	97	287	
Total ...			260	166	726	673	669	626	

TABLE II.—(continued).

B.—Classification of the Nutrition of Children Inspected during the Year in the Routine Age Groups.

Age-Groups.	Number of Children inspected	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants	1821	972	53·38	739	40·58	109	5·99	1	·05
Second Age-group ...	1735	774	44·61	711	40·98	247	14·24	3	·17
Third Age-group ...	1627	1023	62·88	426	26·18	175	10·76	3	·18
Other Routine Inspections ...	305	155	50·82	119	39·02	30	9·83	1	·33
Total ...	5488	2924	53·28	1995	36·35	561	10·22	8	·15

TABLE III.

Return of all Exceptional Children in the Area.

BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
3	—	—	1	4

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
2	—	3	—	—	5

TABLE III.—(continued).**DEAF CHILDREN.**

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
9	—	—	—	9

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
3	—	4	—	—	7

MENTALLY DEFECTIVE CHILDREN.**Feeble-Minded Children.**

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
70	7	4	10	91

EPILEPTIC CHILDREN.**Children suffering from Severe Epilepsy.**

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	8	1	1	11

TABLE III.—(*continued*).**PHYSICALLY DEFECTIVE CHILDREN.****A. Tuberculous Children.****I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.**

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	18	1	2	21

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	31	5	2	38

B. Delicate Children.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	161	2	4	167

C. Crippled Children.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	4	6	2	12

D. Children with Heart Disease.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
2	4	—	2	8

TABLE III.—(continued).**CHILDREN SUFFERING FROM MULTIPLE DEFECTS.**

Combination of Defect.	At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
M.D. + Congenital equino varus	1	—	—	—	1
M.D. + Epilepsy ...	3	—	—	—	3
M.D. + Cerebral diplegia	—	—	—	1	1
M.D. + Spastic paraplegia ...	—	—	—	1	1

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED
31ST DECEMBER, 1937.

TREATMENT TABLE.

Group I.—Minor Ailments (excluding Uncleanliness, for which see Table VI.).

Disease or Defect.	Number of Defects treated or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
SKIN—			
Ringworm-Scalp—			
(i) X-Ray treatment ...	—	—	—
(ii) Other treatment ...	5	1	6
Ringworm, Body ...	26	—	26
Scabies ...	101	8	109
Impetigo ...	439	2	441
Other skin disease ...	105	42	147
MINOR EYE DEFECTS ...	319	5	324
(External and other, but excluding cases falling in Group II.)			
MINOR EAR DEFECTS ...	423	4	427
MISCELLANEOUS ...	1669	63	1732
(e.g., minor injuries, bruises, sores, chilblains, etc.)			
Total ...	3087	125	3212

TABLE IV.—(continued).

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

	NO. OF DEFECTS DEALT WITH.		
	Under the Authority's Scheme.	Otherwise.	TOTAL.
Errors of Refraction (including Squint) ... (Operations for squint should be recorded separately in the body of the School Medical Officer's Report.)	489	18	507
Other Defect or Disease of the Eyes (excluding those recorded in Group I.)	—	—	—
Total ...	489	18	507
No. of children for whom spectacles were :—	Under the Authority's Scheme.	Otherwise.	TOTAL.
(a) Prescribed	381	18	399
(b) Obtained	376	18	394

Group III.—Treatment of Defects of Nose and Throat.

NUMBER OF DEFECTS.													
Received Operative Treatment.												Received other forms of Treatment.	Total number treated.
Under the Authority's Scheme, in Clinic or Hospital. (1)				By Private Practitioner or Hospital, apart from the Authority's Scheme. (2)				Total. (3)					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(4)	(5)
—	5	251	—	—	—	7	—	—	5	258	—	11	274

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and adenoids.
(iv) Other defects of the nose and throat.

REPORT OF THE SENIOR MEDICAL OFFICER IN REGARD TO ORTHOPAEDIC IN-PATIENT TREATMENT OF SCHOOL CHILDREN.

I submit the following report on the results of the in-patient treatment at Stanmore of those children for whose maintenance the Education Committee is responsible.

When considering the results of any form of treatment, it is natural that most satisfaction is obtained when a large proportion of the cases can be recorded as "cured." In surgical work, the word "cure" may have various interpretations. Thus, an operation for acute appendicitis usually ends in the condition being completely "cured." On the other hand, a workman may have a leg so badly smashed that amputation of the limb is essential. The patient recovers and is fitted with an artificial limb, but it cannot be said the mangled limb was "cured."

In orthopaedic surgery, in many cases, the surgeon is faced with extremely difficult problems. In his treatment of a crippling condition his aim may be to produce : (a) a definite cure, (b) an improvement of the condition, or (c) the prevention of the crippling becoming worse and perhaps leading to a completely crippled state of existence. It all depends on the nature of the case, for although in many instances conditions *are* cured, it will be realised that others are of such a nature that an improvement is all that can be aimed at. The orthopaedic surgeon has to deal with the deformed body as it is given to him. Nature does not provide "spare parts."

One other point I should like to emphasise : a child does not "grow out" of a crippling condition. If untreated, it *grows up* with the condition, unable to take part to the full in a child's activities and enjoyments, with an ever-growing impression of being different, or "inferior" to other children ; in later life, when the body is fully developed, the condition becomes static, leading to permanent disability—severe in many cases.

I.—During the past five years—the period with which this Report deals—the number of school children admitted to Stanmore for treatment was : 1933, 10 ; 1934, 10 ; 1935, 10 ; 1936, 11 ; 1937, 11 ; the total number of admissions, 52. Of these cases, however, four children have been re-admitted in different years, their treatment requiring to be done in "stages."

The actual number of *children* is thus 48.

The following is a list of the children treated, with the results :—

	ORTHOPAEDIC CONDITION.	RESULT OF TREATMENT.
1	Tumour, left knee	<i>Cured.</i>
2	Club foot, very deformed, foot turned over and limped on outside of foot (N.S.P.C.C. case).	<i>Very good</i> : walks well : no instrument required.
3*	Club feet (very bad)	<i>Gradually improving</i> : feet now in walking plaster.
4	Infantile paralysis of right leg (could not walk).	<i>Greatly improved</i> : walks with a simple instrument : working.
5	Infantile paralysis of left leg (leg useless).	<i>Very good</i> : runs, cycles, skates : works on Southern Railway : wears ordinary boots.
6*	Spastic paralysis	<i>Greatly improved</i> : walks very well.
7	Right congenital dislocation of hip.	<i>Greatly improved</i> : walks well : working : no instrument required.
8	Infantile paralysis of right leg (foot useless).	<i>Very good</i> : working.
9	Birth palsy, left arm	<i>Greatly improved</i> : last seen in 1936.
10	Spinal curvature	<i>Very good</i> : working.
11*	Paralysis of peroneal muscles of legs : feet turned over.	Last seen in 1936 : feet were <i>satisfactory then</i> : now refuses to attend : was ejected from Sanatorium for language and behaviour.
12	Wry neck, severe (N.S.P.C.C. case).	<i>Improved</i> : requires more treatment, but parents refuse and not severe enough to force.
13	Cut tendon of right foot, which was completely turned over (accident).	<i>Very good</i> : has left school.

(*Also treated in Orthopaedic Ward at the Borough Sanatorium.)

	ORTHOPAEDIC CONDITION.	RESULT OF TREATMENT.
14	Infantile paralysis, severe condition.	Died in Stanmore.
15*	Wry neck	<i>Cured.</i>
16*	Infantile paralysis, both legs; unable to walk : wheeled about.	<i>Improved:</i> can now walk with an instrument.
17*	Infantile paralysis, both legs; unable to walk : pushed in a go-cart.	<i>Great improvement:</i> now walks : has one leg in a support, other without support. Now developed diabetes.
18	Bursa, left leg	<i>Cured.</i>
19*	Infantile paralysis, left leg ...	<i>Greatly improved:</i> walks well in ordinary boots.
20*	Congenital dislocation of left hip : walked with waddling gait.	<i>Great improvement:</i> walks normally : plays games : no disability.
21*	Spinal curvature, very severe ...	<i>Great improvement.</i> Had a spinal bone graft : now has a good spine : jacket to be removed in two months.
22*	Spastic paralysis, affecting right side, arm, and leg. Has fits.	Foot treated, <i>improved.</i> Now left school.
23	Arthritis, both wrists	<i>Greatly improved:</i> wrists still slightly stiff : is employed.
24	Feet—flat and immobile	<i>Cured:</i> feet mobile.
25*	Club foot, left	<i>Cured:</i> now a normal foot : walks well.
26*	Knock knees, 4 inches	<i>Cured:</i> no splints needed.
27*	Infantile paralysis, left leg : left foot clawed	Foot put straight—has relapsed—needs further treatment.
28	Exostosis (bony growth left leg)	<i>Cured.</i>
29	Wry neck	<i>Cured.</i>
30*	Infantile paralysis, right leg ...	<i>Greatly improved:</i> now no instrument, but in a walking plaster.
31*	Spina bifida (severe), with no bowel control : unable to walk.	<i>Satisfactory:</i> now walks a little : bowel control slightly improved : no cure can be expected.
32*	Infantile paralysis, legs, with both feet badly arched.	<i>Greatly improved:</i> now walks well in ordinary shoes : now left school.
33	Arched right foot : (?) infantile paralysis.	<i>Very good result :</i> no deformities now. <i>Cured.</i>
34	Wry neck	<i>Cured.</i>
35	Wry neck	<i>Cured.</i>
36	Wry neck	<i>Cured.</i>
37*	(1) Infantile paralysis, right leg	(1) <i>Greatly improved:</i> now walks in a short instrument and is at school and
	(2) Wry neck	(2) <i>Cured.</i>
38	Overlapping Great Toe (hallux valgus).	<i>Cured.</i>
39	Wry neck	<i>Cured.</i>
40	Double pes cavus (highly arched feet).	<i>Very good result</i> —very satisfactory. Still kept under observation.
41*	Birth Palsy (left arm). No use of hand : drop wrist.	<i>Satisfactory.</i> Now uses hand—still under treatment.
42*	Infantile paralysis, left leg, flail foot.	<i>Improved:</i> now walks well with a surgical boot.
43	Wry neck	<i>Improved.</i>
44	Wry neck	<i>Cured.</i>
45	Infantile paralysis, left leg, with flail foot.	<i>Greatly improved</i> —is in walking plaster—at school.
46	Birth palsy (left)	Still under treatment.
47	Pneumococcic infection of hip ...	<i>Improved</i> —hip now making a natural socket.
48	Rigid great toe	<i>Improved</i> —still under treatment.

(* Also treated in Orthopaedic Ward at the Borough Sanatorium.)

These results may be tabulated thus :—

Cured	15	} 44
Very good result	6	
Greatly improved	13	
Improved and satisfactory	10	
Relapsed (further treatment necessary)	1	
Still under treatment (massage, etc.)	2	
Died	1	

I have drawn, perhaps, a somewhat fine distinction in the tabulation of results. Those returned as "*cured*" are cases who show no difference now from a normal individual; those returned as "*very good result*" are cases where function and mobility are now normal, but where the limb, from the nature of the condition, shows deviation from the normal in size or shape. The "*greatly improved*" are mostly cases of paralysis where, before treatment, the patient was unable to use a limb, or limbs, but can now walk, in some instances with a supporting splint, in others without any support, but where the affected part shows deviation in development from the normal. Those classed "*improved and satisfactory*" are having post operative treatment.

In considering the results as given above, and taking into account the nature of the conditions treated, I have no hesitation in stating that they are extremely good.

The child who died suffered from severe infantile paralysis and his mental condition was also affected. No cure could be hoped for, but treatment was undertaken to alleviate the contortion of his legs—he could only walk when able to support himself by holding on to objects.

I think it would be interesting for the Committee to have some particulars about the activities of the Orthopaedic Department. Thus :—

II.—In addition to the cases described above, during the same five years treatment has been given to school children suffering from tubercular conditions. The responsibility for these children comes under the Tuberculosis Scheme of the Health Committee.

Fourteen children have been treated—8 cases of tubercular disease of hip, 5 of the knee, and 1 of the spine.

Treatment of these cases is of paramount importance for, if untreated, tuberculosis leads to erosion and destruction of the affected part with severe crippling, and in many cases to extension of the disease, with fatal results.

The treatment is of long duration, and such cases are not discharged, but are kept under observation for years to see that the disease, having been arrested, remains quiescent.

The results have been satisfactory; after treatment at Stanmore, they return to the Sanatorium; several are now attending school. One girl, however, suffering from tuberculosis of the hip, died last September.

III.—Apart from the cases that require operative treatment, a considerable amount of orthopaedic treatment is given at the Clinic, *e.g.*, massage, remedial exercises, electrical treatment, education in walking, etc. During the five years under review, the number of children referred to the Orthopaedic Surgeon was : 1933, 40; 1934, 61; 1935, 48; 1936, 53; 1937, 63. Total, 265.

During this period the following cases have been discharged as cured—requiring no further treatment :—

	1933.	1934.	1935.	1936.	1937.	Total.
Spinal curvature	1	1	2	3	5	12
Kyphosis (round shoulders)	—	—	—	—	8	8
Knock Knees or Bow Legs	1	4	—	3	5	13
Club Feet	—	—	2	—	—	2
Flat Feet	6	13	8	8	6	41
Other conditions	6	9	5	5	9	34
Total number discharged						110

In addition to these discharges, many cases have been improved, but are still under observation and are seen at intervals of three months, etc.

For the same period, 141 pre-school children, under the Infant Welfare Clinic, have also been seen and treated ; 26 have been discharged. This side of the work is important as treatment can be started in the earliest stages. The youngest patient in 1937 was an infant of two days.

To sum up, I would say that I regard orthopaedic treatment as the most important and beneficial development of the School Medical Service. Prior to its inception it was a matter of great concern and regret to me to find in our schools children with crippling and disabling conditions for which nothing was done, and to observe them, as time went on, becoming worse. This concern was particularly felt for the leavers—boys and girls going out into the world severely handicapped, many with no likelihood of getting useful employment.

The Committee, however, can be assured that if a crippled child's condition is such that it can be cured or improved, by human agency, such means are present in this Orthopaedic Scheme.

For those cases which require in-patient treatment, apart from patients being treated at a modern hospital, ideally situated, they have the benefit—where it is necessary—of being seen by a panel of the consulting surgeons from the Royal National Orthopaedic Hospital—one of the foremost orthopaedic hospitals in the world.

To look at the orthopaedic treatment from another aspect—the financial aspect—it is well to remember that the majority of the in-patient cases would be unable to attend an elementary school : it would be our duty then to send them away from their homes to Approved Schools for the Physically Defective.

I should like to place on record here—as the opportunity does not often arise—my appreciation for the excellent work which is done in the orthopaedic department. The Clinics which I arrange for the Surgeon are heavy, and the work is very exacting, but it is tackled with enthusiasm, and to each case is brought expert skill and knowledge, combined with tact and a kindly address to anxious parents. The surgeon, I feel sure, would admit that much of the success of the work is due to the skill and infinite patience of the Orthopaedic Nurse, in whose hands lies the after-treatment of many cases.

(Signed) RUTHERFORD CRAMB,
Senior Medical Officer.

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